Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 1 of 59

| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF GEORGIA | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1: | Identify Yourself | | |
|-----|--------------------|---|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | Writ | e the name that is on | Howard | |
| | pictu | r government-issued ure identification (for mple, your driver's | First name | First name |
| | licer | nse or passport). | Middle name | Middle name |
| | Bring your picture | | Rivera | |
| | mee | identification to your meeting with the trustee. | Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | use | other names you have d in the last 8 years ude your married or | Howard Rivera Zambrana | |
| 3. | Only you num | den names. y the last 4 digits of r Social Security other or federal | xxx-xx-0924 | |
| | | vidual Taxpayer ntification number N) | | |

Case 19-52729-jwc Doc 1 Document Page 2 of 59

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | |
|----|---|---|---|--|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | ☐ I have not used any business name or EINs. | | | |
| | Include trade names and doing business as names | Business name(s) | Business name(s) | | | |
| | | EINs | EINs | | | |
| 5. | Where you live | 1099 Wynnbrook Ln | If Debtor 2 lives at a different address: | | | |
| | | Jonesboro, GA 30238 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | | |
| | | Clayton | | | | |
| | | County | County | | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | | |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | | | |
| | | | | | | |

Case 19-52729-jwc Doc 1

Case number (if known) Debtor 1 Howard Rivera

| 7. | The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | | | | |
|-----|--|---|---------------------------------|---|-------------------------|--|---|--|--|--|--|
| | choosing to file under | ☐ Chapter 7 | | | | | | | | | |
| | | ☐ Chap | | | | | | | | | |
| | | □ Chap | | | | | | | | | |
| | | ■ Chap | | | | | | | | | |
| | | - Chap | oter 15 | | | | | | | | |
| 8. | How you will pay the fee | ab or | out how yo | entire fee when I file my pour may pay. Typically, if you a attorney is submitting your paddress. | are paying | the fee yourself, | you may pay with cash | n, cashier's check, or money | | | |
| | | | | the fee in installments. If | | e this option, sigr | and attach the Applica | ation for Individuals to Pay | | | |
| | | | • | e in Installments (Official For at my fee be waived (You ma | , | this ontion only i | f you are filing for Char | oter 7. By law, a judge may | | | |
| | | — bı ap | ut is not requ oplies to you | | may do so able to pa | o only if your inco y the fee in instal | me is less than 150% of liments). If you choose | of the official poverty line that this option, you must fill out | | | |
| 9. | Have you filed for | □ No. | | | | | | | | | |
| | bankruptcy within the last 8 years? | Yes. | | | | | | | | | |
| | | | | Northern District of | | 0.00014.0 | | | | | |
| | | | District | Georgia | When | 8/07/18 | Case number | 18-63191-jwc | | | |
| | | | District | NDGA | When | 4/20/13 | Case number | 13-58663 | | | |
| | | | District | | When | | Case number | | | | |
| 10. | Are any bankruptcy | ■ No | | | | | | | | | |
| | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | | | | | |
| | | | Debtor | | | | Relationship to y | /ou | | | |
| | | | District | | When | | Case number, if | known | | | |
| | | | Debtor | | | | Relationship to y | /ou | | | |
| | | | District | | When | | Case number, if | known | | | |
| 11. | Do you rent your residence? | ■ No. | Go to li | ine 12. | | | | | | | |
| | | ☐ Yes. | Has yo | our landlord obtained an evict | tion judgm | ent against you? | | | | | |
| | | | | No. Go to line 12. | | | | | | | |
| | | | | | | | | 101A) and file it as part of | | | |

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 4 of 59

Debtor 1 Howard Rivera Case number (if known)

| Par | Report About Any Bu | sinesses | You Own | as a Sole Proprietor | | | | |
|-----|---|--|----------|--|--|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | | |
| | | ☐ Yes. | Name | e and location of business | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | e of business, if any | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | | per, Street, City, State & ZIP Code | | | | |
| | it to this petition. | | | k the appropriate box to describe your business: | | | | |
| | | | | Health Care Business (as defined in 11 U.S.C. § 101(27A)) | | | | |
| | | | | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) | | | | |
| | | | | Stockbroker (as defined in 11 U.S.C. § 101(53A)) | | | | |
| | | | | Commodity Broker (as defined in 11 U.S.C. § 101(6)) | | | | |
| | | | | None of the above | | | | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | der Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate ndicate that you are a small business debtor, you must attach your most recent balance sheet, statement of low statement, and federal income tax return or if any of these documents do not exist, follow the procedure (1)(B). | | | | | | |
| | For a definition of small | No. | I am r | not filing under Chapter 11. | | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| | | ☐ Yes. | I am f | illing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| Par | t 4: Report if You Own or | Have Any | Hazardo | ous Property or Any Property That Needs Immediate Attention | | | | |
| 14. | Do you own or have any | ■ No. | | | | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is | the hazard? | | | | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | diate attention is why is it needed? | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? Number, Street, City, State & Zip Code | | | | |
| | | | | Hamber, Orioti, Oriy, Oraco & Zip Oode | | | | |

Debtor 1 Howard Rivera Document Page 5 of 59

Case number (if known)

Part 5: Exp

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 6 of 59

Case number (if known) Debtor 1 **Howard Rivera** Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. State the type of debts you owe that are not consumer debts or business debts 16c. 17. Are you filing under I am not filing under Chapter 7. Go to line 18. No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses ☐ Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses □ No are paid that funds will □ Yes be available for distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Howard Rivera Signature of Debtor 2 **Howard Rivera** Signature of Debtor 1 Executed on February 19, 2019 Executed on MM / DD / YYYY MM / DD / YYYY

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 7 of 59

Debtor 1 Howard Rivera Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Lorena L. Saedi | Date | February 19, 2019 |
|--|---------------|--------------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Lorena L. Saedi 622072 | | |
| Printed name | | |
| Saedi Law Group, LLC | | |
| Firm name | | |
| 3006 Clairmont Road, Ste. 103 | | |
| Atlanta, GA 30329 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone 404-889-8663 | Email address | Isaedi@saedilawgroup.com |
| 622072 GA | | |
| Bar number & State | | |

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 8 of 59

| Debtor 1 Howard Rivera Debtor 2 Howard Rivera Last Name Last Name Last Name Debtor 2 First Name Middle Name Last Name Last Name Debtor 2 First Name Middle Name Last Name Last Name Debtor 2 First Name Middle Name Last Name Last Name Debtor 2 First Name Middle Name Last Name Debtor 2 First Name Middle Name Last Name Debtor 2 Check if this is an amended filling Debtor 1 Debtor 2 Check if this is an amended filling Destroy Name Des | | | | | | | |
|--|----------|------------------|----------------------------------|---------------------------------|----------------------------------|---------------------------------|------------------------|
| Peri Name Middle Name Last Name La | Fill | in this inform | nation to identify you | case: | | | |
| Debtor 2 Sequent times Frail Name Middle Name Last Name Middle Name Last Name Middle Name Last Name Middle Nam | Del | btor 1 | Howard Rivera | | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA Case number (If thrown) Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before I. What is your current marital status? Married Not married Debtor 1 Prior Address: Dates Debtor 1 Not married Within the last 8 years, have you lived anywhere other than where you live now. Debtor 1 Prior Address: Dates Debtor 1 Not married Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the lotal amount of income your received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Debtor 1 Sources of income (Check all that apply). Cross income (Check all that apply). Sources of income (Check all that apply). From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | | | First Name | Middle Name | Last Name | | |
| Case number Check if this is an amended filling Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Arte Bo as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? | | | First Name | Middle Name | Last Name | | |
| Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not marrie | Uni | ited States Ba | nkruptcy Court for the: | NORTHERN DISTRICT (| OF GEORGIA | | |
| Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not marrie | Car | sa numhar | | | | | |
| Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? | | _ | | | | | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married During the last 3 years, have you lived anywhere other than where you live now? Poebtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 1 lived there 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Check all that apply. Debtor 2 Sources of income Check all that apply. Sources of i | | | | | | a | mended ming |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married During the last 3 years, have you lived anywhere other than where you live now? Poebtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 1 lived there 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Check all that apply. Debtor 2 Sources of income Check all that apply. Sources of i | \sim t | ж: -: - I Г- | 107 | | | | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married Not married 2. During the last 3 years, have you lived anywhere other than where you live now? No | | | | | | | |
| Information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before | St | atement | of Financial | Affairs for Individ | duals Filing for B | ankruptcy | 4/16 |
| Married Not | | | | | | | |
| ### Sive Details About Your Marital Status and Where You Lived Before What is your current marital status? | | | • | • | this form. On the top of any | / additional pages, write you | r name and case |
| Married | | | , | | | | |
| Married | Pai | Give L | Details About Your Ma | irital Status and Where You | Lived Before | | |
| During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Ilived there Debtor 2 Prior Address: Dates Debtor 2 Ilived there 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Gross income Check all that apply. Wages, commissions, bonuses, tips \$7,960.00 | 1. | What is you | r current marital statu | is? | | | |
| During the last 3 years, have you lived anywhere other than where you live now? No | | ☐ Married | | | | | |
| No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived there Debtor 2 Prior Address: Dates Debtor 2 lived there 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) Pettor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips \$7,960.00 | | ■ Not mar | rried | | | | |
| Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Debtor 2 Prior Address: Dates Debtor 2 Debtor 3 Debtor 4 Debtor 4 Debtor 4 Debtor 4 Debtor 4 Debtor 5 Debtor 6 Debtor 6 Debtor 6 Debtor 7 Debtor 6 Debtor 7 Debtor 7 Debtor 7 Debtor 8 Debtor 9 | 2. | During the la | ast 3 years, have you | lived anywhere other than | where you live now? | | |
| Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Debtor 2 Prior Address: Dates Debtor 2 Debtor 3 Debtor 4 Debtor 4 Debtor 4 Debtor 4 Debtor 4 Debtor 5 Debtor 6 Debtor 6 Debtor 6 Debtor 7 Debtor 6 Debtor 7 Debtor 7 Debtor 7 Debtor 8 Debtor 9 | | | | • | • | | |
| Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Debtor 3 Debtor 4 Debtor 2 Debtor 4 Debtor 5 Debtor 5 Debtor 6 Debtor 6 Debtor 7 Debtor 6 Debtor 7 Debtor 7 Debtor 8 Debtor 9 Debto | | _ | t all of the places you li | ived in the last 2 years. Do no | at include where you live now | , | |
| lived there lived there lived there lived there lived there lived there | | □ 165. LIS | it all of the places you i | ived in the last 3 years. Do no | or include where you live now | | |
| No Ves. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Ves. Fill in the details. Debtor 1 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filled for bankruptcy: Wages, commissions, bonuses, tips \$7,960.00 | | Debtor 1 Pr | ior Address: | | Debtor 2 Prior Ad | dress: | |
| No Ves. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No Ves. Fill in the details. Debtor 1 Sources of income Check all that apply. Debtor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filled for bankruptcy: Wages, commissions, bonuses, tips \$7,960.00 | 3 | Within the Is | est 8 years did you ey | ver live with a snouse or led | nal equivalent in a commun | ity property state or territory | 12 (Community property |
| Tyes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips \$4,168.00 Wages, commissions, bonuses, tips | state | | | | | | |
| □ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. □ No ■ Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips \$4,168.00 ■ Wages, commissions, bonuses, tips | | ■ No | | | | | |
| Explain the Sources of Your Income 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips \$7,960.00 | | _ | ake sure vou fill out <i>Sch</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | |
| 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips \$7,960.00 | | | | | | | |
| Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips \$4,168.00 Wages, commissions, bonuses, tips \$7,960.00 | Pai | rt 2 Explai | n the Sources of You | r Income | | | |
| Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips \$4,168.00 Wages, commissions, bonuses, tips \$7,960.00 | 4. | Did vou hav | e anv income from en | nplovment or from operatin | a a business during this ve | ear or the two previous caler | ndar vears? |
| □ No ■ Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$4,168.00 Wages, commissions, bonuses, tips \$7,960.00 | | Fill in the tota | al amount of income yo | u received from all jobs and a | all businesses, including part- | time activities. | , |
| Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$4,168.00 Wages, commissions, bonuses, tips \$7,960.00 | | ir you are filir | ig a joint case and you | nave income that you receive | e togetner, list it only once ur | ider Debtor 1. | |
| Debtor 1 Sources of income Check all that apply. From January 1 of current year until the date you filed for bankruptcy: Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Sources of income (before deductions and exclusions) Wages, commissions, bonuses, tips \$4,168.00 Wages, commissions, bonuses, tips \$7,960.00 | | □ No | | | | | |
| Sources of income Check all that apply. Gross income (before deductions and exclusions) From January 1 of current year until the date you filed for bankruptcy: Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) \$4,168.00 | | Yes. Fill | in the details. | | | | |
| Check all that apply. Check all that apply. (before deductions and exclusions) Check all that apply. Check all that apply. (before deductions and exclusions) The date you filed for bankruptcy: Wages, commissions, bonuses, tips \$4,168.00 Wages, commissions, bonuses, tips \$7,960.00 | | | | Debtor 1 | | Debtor 2 | |
| From January 1 of current year until the date you filed for bankruptcy: Wages, commissions, bonuses, tips \$4,168.00 Wages, commissions, bonuses, tips \$7,960.00 | | | | | (before deductions and | | (before deductions |
| the date you filed for bankruptcy: wages, commissions, bonuses, tips wages, commissions, bonuses, tips | _ | | | | , | | , |
| ☐ Operating a business ☐ Operating a business | | | | _ | \$4,168.00 | _ | \$7,960.00 |
| | | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Page 9 of 59 Case number (if known) Document

Debtor 1 Howard Rivera

| Debtor 1 | | Debtor 2 | |
|--|--|---|---|
| Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| ■ Wages, commissions, bonuses, tips | \$23,794.19 | ■ Wages, commissions, bonuses, tips | \$47,760.00 |
| ☐ Operating a business | | ☐ Operating a business | |
| ■ Wages, commissions, bonuses, tips | \$38,010.00 | ■ Wages, commissions, bonuses, tips | \$47,760.00 |
| ☐ Operating a business | | ☐ Operating a business | |
| | Sources of income Check all that apply. Wages, commissions, bonuses, tips Operating a business Wages, commissions, bonuses, tips | Sources of income Check all that apply. Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips Operating a business Wages, commissions, bonuses, tips \$38,010.00 | Sources of income Check all that apply. Gross income (before deductions and exclusions) \$\begin{align*} \text{Sources of income} \text{Check all that apply.} \text{\$\text{Sources of income} \text{\$\text{Check all that apply.}} \text{\$\text{\$\text{Sources of income} \text{\$\text{Check all that apply.}} \text{\$\text{\$\text{Sources of income} \text{\$\text{Check all that apply.}} \text{\$\text{\$\text{Sources of income} \text{\$\text{\$\text{Check all that apply.}} \text{\$\text{\$\text{\$\text{Check all that apply.}} \$\text{\$ |

Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony, child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

| | Debtor 1 | | Debtor 2 | | | | |
|---|---|-------------|--------------------------------------|---|--|--|--|
| | Sources of income Describe below. Gross income from each source (before deductions and exclusions) | | Sources of income Describe below. | Gross income (before deductions and exclusions) | | | |
| For last calendar year: (January 1 to December 31, 2018) | Non Filing Spouse's Income | \$26,600.00 | | | | | |
| For the calendar year before that: (January 1 to December 31, 2017) | Non Filing Spouse's Income | \$35,428.00 | | | | | |
| For the calendar year: (January 1 to December 31, 2016) | Non Filing Spouse's Income | \$27,620.00 | | | | | |

List Certain Payments You Made Before You Filed for Bankruptcy

| 3. <i>F</i> | Are either | Debtor 1 | 's or | Debtor | 2's c | lebts | primari | ily (| consumer | del | ots |
|-------------|------------|----------|-------|--------|-------|-------|---------|-------|----------|-----|-----|
|-------------|------------|----------|-------|--------|-------|-------|---------|-------|----------|-----|-----|

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

 \square No.

☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7. ☐ Yes

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 10 of 59 Case number (if known)

| | Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this pay | ment for |
|-----|--|---|---|--|-----------------------------------|--|
| 7. | Within 1 year before you filed for bankrupter Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. | artners; relatives of any gen- control, or owner of 20% of | eral partners; partner r more of their votin | erships of which you g securities; and an | u are a general ly managing ag | partner; corporations gent, including one for |
| | No | | | | | |
| | Yes. List all payments to an insider. | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for t | his payment |
| 8. | Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos | | ments or transfer a | any property on ac | count of a de | bt that benefited an |
| | ☐ Yes. List all payments to an insider | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for t | this payment tor's name |
| Par | t 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | |
| 9. | Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | | | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the | e case |
| 10. | Within 1 year before you filed for bankrupton Check all that apply and fill in the details below | | erty repossessed, f | foreclosed, garnis | hed, attached | , seized, or levied? |
| | No. Go to line 11.☐ Yes. Fill in the information below. | | | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the |
| | | | | | | property |
| | | Explain what happened | | | | |
| 11. | Within 90 days before you filed for bankrup accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details. | | uding a bank or fi | nancial institution | , set off any a | mounts from your |
| | Creditor Name and Address | Describe the action the | creditor took | | action was | Amount |
| | | | | taken | | |
| 12. | Within 1 year before you filed for bankrupte court-appointed receiver, a custodian, or a | | erty in the possess | ion of an assigned | e for the benef | fit of creditors, a |
| | No | | | | | |
| | ☐ Yes | | | | | |
| | | | | | | |

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 11 of 59 Case number (if known)

| Pai | t 5: List Certain Gifts and Contributions | | | |
|-----|--|---|------------------------------------|---------------------------|
| 13. | Within 2 years before you filed for bankrupto: No Yes. Fill in the details for each gift. | y, did you give any gifts with a total value of more | than \$600 per person [•] | ? |
| | Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and Address: | Dates you gave the gifts | Value | |
| 14. | Within 2 years before you filed for bankruptc ■ No □ Yes. Fill in the details for each gift or contrib | y, did you give any gifts or contributions with a tot | al value of more than | \$600 to any charity? |
| | Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | Describe what you contributed | Dates you contributed | Value |
| Pai | t 6: List Certain Losses | | | |
| 15. | Within 1 year before you filed for bankruptcy or gambling? ■ No □ Yes. Fill in the details. | or since you filed for bankruptcy, did you lose any | thing because of the | t, fire, other disaster |
| | how the loss occurred Inclu | cribe any insurance coverage for the loss ude the amount that insurance has paid. List pending rance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Pai | t 7: List Certain Payments or Transfers | | | |
| 16. | consulted about seeking bankruptcy or prepare | did you or anyone else acting on your behalf pay aring a bankruptcy petition? rers, or credit counseling agencies for services require | | rty to anyone you |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | Saedi Law Group, LLC 3006 Clairmont Road Ste 103 Atlanta, GA 30329 www.saedilawgroup.com | \$310 Filling Fee and \$45 Credit Report Fee | 08/04/2018 | \$355.00 |
| | 001 Debtorcc Inc. 372 Summit Ave Jersey City, NJ 07306 www.debtoredu.com | Credit counseling course | 08/04/2018 | \$14.95 |

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 12 of 59 Case number (if known)

| 17. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details. | | | | | | | | |
|-----|--|---|----------------------------|-----------------|---|---|--|--|--|
| | Person Who Was Paid Address | Description and vatransferred | alue of any prope | rty | Date payment or transfer was made | Amount of payment | | | |
| | Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details. | siness or financial affai le as security (such as th | irs? | | | | | | |
| | Person Who Received Transfer Address Person's relationship to you | Description and value of property transferred Describe any property or payments received or debts paid in exchange | | | | Date transfer was made | | | |
| 19. | Within 10 years before you filed for bankruptobeneficiary? (These are often called asset-prote No ☐ Yes. Fill in the details. | | oproperty to a sel | lf-settled trus | st or similar device (| of which you are a | | | |
| | Name of trust | Description and va | alue of the proper | ty transferre | d | Date Transfer was made | | | |
| Par | 8: List of Certain Financial Accounts, Insti | ruments, Safe Deposit | Boxes, and Stora | ge Units | | | | | |
| | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, association No | other financial accoun | ts; certificates of | | | | | | |
| | | Last 4 digits of account number | Type of account instrument | clos | e account was sed, sold, red, or sferred | Last balance before closing or transfer | | | |
| 21. | Do you now have, or did you have within 1 ye cash, or other valuables? | ear before you filed for | bankruptcy, any s | safe deposit | box or other deposi | tory for securities, | | | |
| | Yes. Fill in the details. Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acce Address (Number, State and ZIP Code) | | escribe the c | ontents | Do you still have it? | | | |
| 22. | Have you stored property in a storage unit or ■ No □ Yes. Fill in the details. | | home within 1 ye | ar before you | ı filed for bankrupto | ry? | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or hat to it? Address (Number, State and ZIP Code) | | escribe the c | ontents | Do you still have it? | | | |

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 13 of 59 Case number (if known)

| Pai | t 9: Identify Property You Hold or Control for | Someone Else | | | | | | | | |
|-----|--|---|--------------------|--------------------------------------|---------------------|--|--|--|--|--|
| 23. | Do you hold or control any property that someo for someone. | ne else owns? Include any proper | rty you | u borrowed from, are storing fo | r, or hold in trust | | | | | |
| | No No | | | | | | | | | |
| | Yes. Fill in the details. | | _ | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Desc | cribe the property | Value | | | | | |
| Pai | t 10: Give Details About Environmental Informa | ation | | | | | | | | |
| For | the purpose of Part 10, the following definitions | apply: | | | | | | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances. | ir, land, soil, surface water, ground | | | | | | | | |
| • | Site means any location, facility, or property as to own, operate, or utilize it, including disposal | sites. | | | | | | | | |
| | Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s | | s wast | e, hazardous substance, toxic | substance, | | | | | |
| Rep | ort all notices, releases, and proceedings that yo | ou know about, regardless of wher | n they | occurred. | | | | | | |
| 24. | Has any governmental unit notified you that you | ı may be liable or potentially liable | unde | r or in violation of an environm | ental law? | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it ZIP Code) | | | | | | | | | |
| 25. | Have you notified any governmental unit of any release of hazardous material? | | | | | | | | | |
| | ■ No | | | | | | | | | |
| | Yes. Fill in the details. | | | | 5 | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | | Environmental law, if you know it | Date of notice | | | | | |
| 26. | Have you been a party in any judicial or adminis | strative proceeding under any envi | ironm | ental law? Include settlements | and orders. | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | | Status of the case | | | | | |
| Pai | t 11: Give Details About Your Business or Con | , | | | | | | | | |
| | | • | .v. of 4 | ha fallowing connections to an | v business? | | | | | |
| 21. | Within 4 years before you filed for bankruptcy, o | • | • | | y business? | | | | | |
| | ☐ A sole proprietor or self-employed in a t | • | | • | | | | | | |
| | ☐ A member of a limited liability company | (LLC) or limited liability partnersh | ııp (LL | P) | | | | | | |
| | ☐ A partner in a partnership — | | | | | | | | | |
| | ☐ An officer, director, or managing execut | ive of a corporation | | | | | | | | |
| | An owner of at least 5% of the veting or | acuity according of a comparation | | | | | | | | |

| Debt | or 1 Howard Rivera | Document | Page 14 of 5 | 9 ase number (<i>if known</i>) |
|------------------|--|--------------------------|-----------------------|--|
| 1 | ■ No. None of the above applies. Go to □ Yes. Check all that apply above and fil | | or each business. | |
| | Business Name Address (Number, Street, City, State and ZIP Code) | Describe the nature of | of the business | Employer Identification number Do not include Social Security number or ITIN. Dates business existed |
| | Within 2 years before you filed for bankrup nstitutions, creditors, or other parties. ■ No □ Yes. Fill in the details below. | tcy, did you give a fina | ncial statement to a | nyone about your business? Include all financial |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | | |
| I have are tr | | ı false statement, conce | ealing property, or o | declare under penalty of perjury that the answers obtaining money or property by fraud in connection ars, or both. |
| How | loward Rivera vard Rivera ature of Debtor 1 | Signature of | Debtor 2 | |
| Date | February 19, 2019 | Date | | |
| D: | au attack additional names to Vary Ctatana | ant of Financial Affaire | for lasticidado Filis | on for Donley many (Official Forms 407) |

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

■ No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

| | Cas | se 19-52/29-Jwc | DOC 1 | Filed 02/19 | | 2/19/19 14:35:14 | 4 Des | sc Main |
|----------------|---------------|--|----------------|--|------------------------------|---------------------------|-------------|--|
| Fill in | this info | rmation to identify your | case and th | Document is filing: | Page 15 of 59 | | | |
| | | | case and in | is illing. | | | | |
| Debto | or 1 | Howard Rivera First Name | Middle | Name | Last Name | | | |
| Debto | or 2 | i list ivallie | Middle | Ivaille | Last Name | | | |
| | e, if filing) | First Name | Middle | Name | Last Name | | | |
| United | d States B | Sankruptcy Court for the: | NORTHER | N DISTRICT OF G | EORGIA | | | |
| Case | number | | | | | | | Check if this is an |
| | | | | | | | | amended filing |
| | | | | | | | | |
| Offi | cial F | orm 106A/B | | | | | | |
| Scl | hedu | le A/B: Prop | ertv | | | | | 12/15 |
| | | separately list and describe | | an asset only once | If an asset fits in more tha | n one category list the a | eset in the | |
| nform Answe | ation. If mo | Be as complete and accura- ore space is needed, attach estion. e Each Residence, Building | a separate sh | neet to this form. On | the top of any additional | pages, write your name a | | |
| | | | | | | | | |
| 1. Do y | ou own or | r have any legal or equitable | interest in a | ny residence, buildir | ng, land, or similar proper | t y? | | |
| | No. Go to Pa | art 2. | | | | | | |
| □ Y | es. Where | is the property? | | | | | | |
| | _ | | | | | | | |
| Part 2 | Describ | e Your Vehicles | | | | | | |
| Do νο | u own. le: | ase, or have legal or equ | itable intere | est in any vehicles | s, whether they are regi | istered or not? Include | any vehic | eles you own that |
| | | rives. If you lease a vehicle | | | | | arry verne | nes you own that |
| 3 Cai | re vane f | rucks, tractors, sport ut | ility vehicles | s motorcycles | | | | |
| o. Oai | , vans, t | rucks, tractors, sport ut | inty vernote. | s, motorcycles | | | | |
| | No | | | | | | | |
| | ⁄es | | | | | | | |
| | | | | | | | | |
| 3.1 | Make: | Toyota | Wh | no has an interest in | the property? Check one | | | s or exemptions. Put aims on Schedule D: |
| | Model: | Rav4 | | Debtor 1 only | | , | • | Secured by Property. |
| | Year: | 2017 | | Debtor 2 only | | Current value of | the C | urrent value of the |
| | | | 700 | Debtor 1 and Debtor | 2 only | entire property? | р | ortion you own? |
| | Other info | | □ | At least one of the de | ebtors and another | | | |
| | LE 2WD |) 14 | | Check if this is com | amunitu proportu | \$19,005 | 5.00 | \$19,005.00 |
| | | | | (see instructions) | inumity property | | | |
| | | | | | | | | |
| 3.2 | Make: | Toyota | Wh | no has an interest in | the property? Check one | | | s or exemptions. Put aims on Schedule D: |
| | Model: | Corolla | _ | Debtor 1 only | | | | Secured by Property. |
| | Year: | 2017 | | Debtor 2 only | | Current value of | the C | urrent value of the |
| | Approxima | ate mileage: 17, | | Debtor 1 and Debtor | 2 only | entire property? | | ortion you own? |
| | Other info | rmation: | | At least one of the de | • | | | |
| | Sedan 4 | 4D LE 14 | _ | | | 645.00 | 0.00 | #4F 000 CC |
| | | | | Check if this is com (see instructions) | nmunity property | \$15,920 | J.UU | \$15,920.00 |

Official Form 106A/B Schedule A/B: Property page 1

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Debtor 1 Howard Rivera Page 16 of 59 Case number (if known)

| | | | | |
|------|--|--|---|--|
| 3.3 | Make: Toyota | Who has an interest in the property? Check one | Do not deduct secured cl | aims or exemptions. Put |
| 3.5 | Model: Corolla | _ | the amount of any secure Creditors Who Have Clai | |
| | Year: 2013 | ■ Debtor 1 only | | |
| | Approximate mileage: 51,000 | Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | Other information: | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | entile property: | portion you own: |
| | Sedan-4D-LE-I4 | At least one of the debtors and another | | |
| | Gedan-4D-LL-14 | ☐ Check if this is community property (see instructions) | \$10,075.00 | \$10,075.00 |
| 3.4 | Make: Honda | Who has an interest in the property? Check one | Do not deduct secured cl | |
| | Model: Civic | Debtor 1 only | Creditors Who Have Clai | |
| | Year: 2011 | Debtor 2 only | Current value of the | Current value of the |
| | Approximate mileage: 90,720 | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | Other information: | ☐ At least one of the debtors and another | | |
| | CPE-2D-DX | ☐ Check if this is community property (see instructions) | \$6,120.00 | \$6,120.00 |
| | | rn for all of your entries from Part 2, including ar that number here | | \$51,120.00 |
| | 3: Describe Your Personal and Household It | | | |
| Do y | ou own or have any legal or equitable in | terest in any of the following items? | : | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| Ε | ousehold goods and furnishings Examples: Major appliances, furniture, linens I No | s, china, kitchenware | | |
| | Yes. Describe | | | |
| | Household Goo | ods | | \$2,000.00 |
| E | lectronics Examples: Televisions and radios; audio, vid including cell phones, cameras, n No Yes. Describe | eo, stereo, and digital equipment; computers, printe nedia players, games | rs, scanners; music collection | ons; electronic devices |
| | 2 Tvs, 1 Tablet, | 1 Laptop and 1 Phone. | | \$900.00 |
| E | other collections, memorabilia, co | prints, or other artwork; books, pictures, or other art | objects; stamp, coin, or ba | seball card collections; |
| _ | No Yes. Describe | | | |
| | quipment for sports and hobbies Examples: Sports, photographic, exercise, an musical instruments | nd other hobby equipment; bicycles, pool tables, gol | f clubs, skis; canoes and ka | nyaks; carpentry tools; |
| | No | | | |

Official Form 106A/B Schedule A/B: Property page 2

Case 19-52729-jwc Document Page 17 of 59 Debtor 1 Case number (if known) **Howard Rivera** ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ΠNο Yes. Describe..... \$500.00 Clothing 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$100.00 Jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No $\hfill \square$ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3,500.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Cash \$20.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... **Delta Community Credit Union Bank Account** \$210.00 Checking **Delta Community Credit Union Bank Account** \$5.00 Savings 17.2.

Doc 1

Filed 02/19/19

Entered 02/19/19 14:35:14

Official Form 106A/B Schedule A/B: Property page 3 Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 18 of 59 Case number (if known)

Debtor 1 **Howard Rivera** 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

Official Form 106A/B Schedule A/B: Property page 4

Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 19 of 59

Case number (if known) Case 19-52729-jwc Doc 1 Howard Rivera

| - | DIOI I | Howard Rivera Case Hall | inder (ii known) |
|-----|---------------------|--|---------------------------------------|
| 29. | | ily support mples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settle | ment, property settlement |
| | ☐ Yes. | s. Give specific information | |
| 30. | Exam | r amounts someone owes you mples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, w benefits; unpaid loans you made to someone else | orkers' compensation, Social Security |
| | ■ No □ Yes. | s. Give specific information | |
| 31. | | ests in insurance policies mples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or | renter's insurance |
| | □ Yes. | s. Name the insurance company of each policy and list its value. Company name: Beneficiary: | Surrender or refund value: |
| 32. | If you | interest in property that is due you from someone who has died u are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently eone has died. | entitled to receive property because |
| | | s. Give specific information | |
| | <i>Exam</i> ■ No | ns against third parties, whether or not you have filed a lawsuit or made a demand for payr mples: Accidents, employment disputes, insurance claims, or rights to sue s. Describe each claim | nent |
| | | r contingent and unliquidated claims of every nature, including counterclaims of the debto | r and rights to set off claims |
| | ■ No | s. Describe each claim | · · |
| 35. | Any fi | financial assets you did not already list | |
| | | s. Give specific information | |
| 36 | | d the dollar value of all of your entries from Part 4, including any entries for pages you have Part 4. Write that number here | |
| Pa | rt 5: De | Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. | |
| 37. | _ | u own or have any legal or equitable interest in any business-related property? | |
| [| _ | Go to Part 6. Go to line 38. | |
| | | | |
| Pa | | Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. f you own or have an interest in farmland, list it in Part 1. | |
| 46. | | ou own or have any legal or equitable interest in any farm- or commercial fishing-related processing to the commercial fishing to the commercial fish | operty? |
| | _ | o. Go to Part 7. es. Go to line 47. | |
| Pa | rt 7: | Describe All Property You Own or Have an Interest in That You Did Not List Above | |
| | | ou have other property of any kind you did not already list? | |
| | | mples: Season tickets, country club membership | |

☐ Yes. Give specific information.......

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 20 of 59 Case number (if known)

| 54. | Add the dollar value of all of your entries from Part 7. Write that | number here | | \$0.00 |
|------|---|-------------|------------------------------|-------------|
| Part | 8: List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | \$51,120.00 | | |
| 57. | Part 3: Total personal and household items, line 15 | \$3,500.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$235.00 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$54,855.00 | Copy personal property total | \$54,855.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$54,855.00 |

Official Form 106A/B Schedule A/B: Property page 6

| Fill in this infor | mation to identify your | case: | *** | |
|---|-------------------------|-------------------|------------|-----------------------|
| Debtor 1 | Howard Rivera | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF GEORGIA | |
| Case number (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

| 1. | Which set of exemptions a | re you claiming? | ? Check one only | v. even if v | our spouse is filing | g with | vou |
|----|---------------------------|------------------|------------------|----------------|----------------------|--------|-----|
|----|---------------------------|------------------|------------------|----------------|----------------------|--------|-----|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption |
|---|--------------------------------------|-----------------------------------|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| Household Goods Line from Schedule A/B: 6.1 | \$2,000.00 | | \$2,000.00 | O.C.G.A. § 44-13-100(a)(4) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| 2 Tvs, 1 Tablet, 1 Laptop and 1 Phone. | \$900.00 | - | \$500.00 | O.C.G.A. § 44-13-100(a)(4) |
| Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Clothing Line from Schedule A/B: 11.1 | \$500.00 | | \$500.00 | O.C.G.A. § 44-13-100(a)(4) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| Jewelry Line from Schedule A/B: 12.1 | \$100.00 | | \$100.00 | O.C.G.A. § 44-13-100(a)(5) |
| | | | 100% of fair market value, up to any applicable statutory limit | |
| Cash Line from Schedule A/B: 16.1 | \$20.00 | | \$20.00 | O.C.G.A. § 44-13-100(a)(6) |
| Ento from Soriodato 7VD. 1911 | | | 100% of fair market value, up to | |

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 22 of 59

Case number (if known)

| | rief description of the property and line on chedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption | |
|---|--|--------------------------------------|---|---|------------------------------------|--|
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| | hecking: Delta Community Credit | \$210.00 | • | \$210.00 | O.C.G.A. § 44-13-100(a)(6) | |
| _ | ine from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | avings: Delta Community Credit | \$5.00 | | \$5.00 | O.C.G.A. § 44-13-100(a)(6) | |
| _ | ine from Schedule A/B: 17.2 | | ☐ 100% of fair market value, up to any applicable statutory limit | | | |
| | re you claiming a homestead exemption Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cover No Yes | 3 years after that for ca | ases fi | , | • | |

| | | Document | Page 23 | of 59 | | |
|---------------------------------------|---------------------------------------|--|----------------|---|--|-----------------------------------|
| Fill in this inform | ation to identify you | r case: | | | | |
| Debtor 1 | Howard Rivera | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Ban | nkruptcy Court for the: | NORTHERN DISTRICT OF GEO | ORGIA | | | |
| | | | | | | |
| Case number(if known) | | | | | | if this is an ed filing |
| Official Form | 1060 | | | | | |
| | | What Have Claims C | ` | d by Duanant | _ | |
| Schedule | D: Creditors | Who Have Claims S | ecured | by Property | <u>/</u> | 12/15 |
| | | f two married people are filing together out, number the entries, and attach it to | | | | |
| 1. Do any creditors l | have claims secured by | your property? | | | | |
| ☐ No. Check | this box and submit th | nis form to the court with your other se | chedules. Yo | ou have nothing else to | report on this form. | |
| Yes. Fill in | all of the information b | pelow. | | | | |
| Part 1: List All | Secured Claims | | | | | |
| for each claim. If mo | ore than one creditor has | nore than one secured claim, list the credir a particular claim, list the other creditors in cal order according to the creditor's name. | in Part 2. As | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 Bridgecres | st | Describe the property that secures the | e claim: | \$11,375.00 | \$10,075.00 | \$1,300.00 |
| Creditor's Name Attn: Bank 7300 E Hai | | 2013 Toyota Corolla 51,000 m Sedan-4D-LE-I4 | | | | |
| 100 | | As of the date you file, the claim is: Chapply. | neck all that | | | |
| Mesa, AZ 8 | 85209 | Contingent | | | | |
| Number, Street, | City, State & Zip Code | Unliquidated | | | | |
| Who owes the del | bt? Check one | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| ■ Debtor 1 only | | ☐ An agreement you made (such as mo | ortgage or sec | eured | | |
| Debtor 2 only | | car loan) | | | | |
| ☐ Debtor 1 and Del | btor 2 only | ☐ Statutory lien (such as tax lien, mech | anic's lien) | | | |
| _ | e debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| Check if this cla | | Other (including a right to offset) | itle Lien | | | |
| Date debt was incu | orred <u>02/2018</u> | Last 4 digits of account numbe | er <u>8901</u> | | | |
| 2.2 Capital On | e Auto Finance | Describe the property that secures the | e claim: | \$24,237.00 | \$15,920.00 | \$8,317.00 |
| Creditor's Name | | 2017 Toyota Corolla 17,500 m Sedan 4D LE I4 | iles | | | |
| Attn: Bank | | As of the date you file, the claim is: Ch | heck all that | | | |
| Po Box 30 | 285 City, UT 84130 | apply. | icon all triat | | | |
| | City, O1 84130 City, State & Zip Code | ☐ Contingent ☐ Unliquidated | | | | |
| Who owes the dek | | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| | or: Check offe. | ☐ An agreement you made (such as mo | ortgage or soc | ured | | |
| ■ Debtor 1 only ■ Debtor 2 only | | car loan) | Jingaye or sec | urcu | | |
| Debtor 1 and Del | btor 2 only | ☐ Statutory lien (such as tax lien, mech | anic's lien) | | | |
| | e debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| Check if this cla | aim relates to a | _ | Γitle Lien | | | |
| Date debt was incu | rred 03/2017 | Last A digits of account number | r 1001 | | | |

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 24 of 59

| Debtor 1 Howard Rivera | | Case number (if known) | | |
|---|--|------------------------|-------------|------------|
| First Name Middle N | ame Last Name | | | |
| 2.3 Capital One Auto Finance | Describe the property that secures the claim: | \$7,327.00 | \$6,120.00 | \$1,207.00 |
| Creditor's Name | 2011 Honda Civic 90,720 miles CPE-2D-DX | | | |
| Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 | As of the date you file, the claim is: Check all th apply. | at | | |
| Number, Street, City, State & Zip Code | ☐ Contingent ☐ Unliquidated | | | |
| rumber, etreet, etty, etate a zip eede | ☐ Disputed | | | |
| Who owes the debt? Check one. | Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only □ Debtor 2 only | ☐ An agreement you made (such as mortgage of car loan) | or secured | | |
| Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lie | n) | | |
| ☐ At least one of the debtors and another | ☐ Judgment lien from a lawsuit | , | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) Title Li | en | | |
| Date debt was incurred 09/2017 | Last 4 digits of account number10 | 01 | | |
| 2.4 World Omni Financial | Describe the property that secures the claim: | \$25,958.00 | \$19,005.00 | \$6,953.00 |
| Creditor's Name | 2017 Toyota Rav4 25700 miles LE 2WD I4 | | | |
| Attn: Bankruptcy Po Box 991817 Mobile, AL 36691 | As of the date you file, the claim is: Check all th apply. Contingent | at | | |
| Number, Street, City, State & Zip Code | ☐ Unliquidated | | | |
| Who owes the debt? Check one. | ☐ Disputed Nature of lien. Check all that apply. | | | |
| ■ Debtor 1 only □ Debtor 2 only | ☐ An agreement you made (such as mortgage of car loan) | or secured | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, mechanic's lie | n) | | |
| lacksquare At least one of the debtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim relates to a community debt | Other (including a right to offset) Title Li | en | | |
| Date debt was incurred 03/2017 | Last 4 digits of account number | 93 | | |
| | | ^^ | | |
| Add the dollar value of your entries in C If this is the last page of your form, add | column A on this page. Write that number here: | \$68,897.0 | | |
| Write that number here: | the donar value totals from all pages. | \$68,897.0 | 0 | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | | Document | Page 25 of 5 | 59 | | |
|---------------------------|---|---|--|--------------------------|----------------------|--------------------|
| Fill in thi | is information to identify your c | ase: | | | | |
| Debtor 1 | Howard Rivera | | | | | |
| | First Name | Middle Name | Last Name | _ | | |
| Debtor 2 (Spouse if, f | | Middle Name | Last Name | | | |
| (Spouse II, I | illing) Thist Name | | | | | |
| United St | tates Bankruptcy Court for the: | NORTHERN DISTRICT OF G | EORGIA | | | |
| Case nur | mber | | | | | |
| (if known) | | | | | ☐ Check | if this is an |
| | | | | | ameno | led filing |
| Officia | I Form 106E/F | | | | | |
| | lule E/F: Creditors W | ho Have Unsecured | Claims | | | 12/15 |
| | plete and accurate as possible. Use | | | | DDIODITY alaima I | |
| | n the Continuation Page to this page case number (if known). List All of Your PRIORITY Unstable 1 | | port in a Part, do not f | ile that Part. On the to | op of any additional | pages, write your |
| 1. Do an | ny creditors have priority unsecured | l claims against you? | | | | |
| | o. Go to Part 2. | | | | | |
| ■ Ye | es. | | | | | |
| identif possik | Il of your priority unsecured claims fy what type of claim it is. If a claim has ble, list the claims in alphabetical orde . If more than one creditor holds a par | s both priority and nonpriority amoun r according to the creditor's name. If | nts, list that claim here a you have more than tw | nd show both priority a | nd nonpriority amoun | ts. As much as |
| (For a | n explanation of each type of claim, so | ee the instructions for this form in the | e instruction booklet.) | | | |
| | | | | Total claim | Priority amount | Nonpriority amount |
| 2.1 | Georgia Department of Reve | enue Last 4 digits of accou | ınt number | \$0.00 | \$0.00 | \$0.00 |
| | Priority Creditor's Name | ent When was the debt in | ocurrod? | | • | - |
| | ATTN: Bankruptcy Departme I 800 Century Blvd., N.E. | FIIL When was the debt in | | | | |
| | Atlanta, GA 30345 | | | | | |
| | Number Street City State Zip Code | <u> </u> | e, the claim is: Check a | II that apply | | |
| _ | incurred the debt? Check one. | ☐ Contingent | | | | |
| = [| Debtor 1 only | ☐ Unliquidated | | | | |
| | Debtor 2 only | ☐ Disputed | | | | |
| | Debtor 1 and Debtor 2 only | Type of PRIORITY un | secured claim: | | | |
| | At least one of the debtors and another | Domestic support o | bligations | | | |
| | Check if this claim is for a commun | ity debt Taxes and certain of | other debts you owe the | government | | |
| | e claim subject to offset? | ☐ Claims for death or | personal injury while yo | u were intoxicated | | |
| | No | Other Specify | | | | |

Notice

☐ Yes

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 26 of 59

| Debte | or 1 Howard Rivera | | Case number (if known) | |
|---------|--|---|--|---------------------------------|
| 2.2 | Internal Revenue Service Priority Creditor's Name ATTN: Bankruptcy Unit | Last 4 digits of account number When was the debt incurred? | \$489.88 | \$489.88 \$0.00 |
| | Stop 335-D, PO Box 995 Atlanta, GA 30370 Number Street City State Zip Code | As of the date you file, the claim is: | Check all that annly | |
| | Who incurred the debt? Check one. | Contingent | onook all that apply | |
| | Debtor 1 only | ☐ Unliquidated | | |
| | ☐ Debtor 2 only | ☐ Disputed | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured claim: | | |
| | ☐ At least one of the debtors and another | ☐ Domestic support obligations | | |
| | ☐ Check if this claim is for a community debt | Taxes and certain other debts you | owe the government | |
| | Is the claim subject to offset? | ☐ Claims for death or personal injury | while you were intoxicated | |
| | No No | Other. Specify | | |
| | Yes | 2017 Taxes | | |
| Part: | 2: List All of Your NONPRIORITY Unsecu | red Claims | | |
| 3. D | o any creditors have nonpriority unsecured claim | s against you? | | |
| | No. You have nothing to report in this part. Submit | this form to the court with your other sche | edules. | |
| | Yes. | | | |
| | | | | |
| u th | ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each cl nan one creditor holds a particular claim, list the other art 2. | aim. For each claim listed, identify what t | ype of claim it is. Do not list claims alrea | ady included in Part 1. If more |
| | | | | Total claim |
| 4.1 | Capital One | Last 4 digits of account number | 8941 | \$550.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy | _ | Opened 01/17 Last Active | |
| | Po Box 30285 | When was the debt incurred? | 6/14/18 | |
| | Salt Lake City, UT 84130 | | | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | _ , | _ | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | I claim: | |
| | ☐ At least one of the debtors and another | Student loans | olam. | |
| | ☐ Check if this claim is for a community debt | | ration agreement or divorce that you di | d not |
| | Is the claim subject to offset? | report as priority claims | and an analysis and you di | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify Credit Card | | |

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 27 of 59

Debtor 1 Howard Rivera Case number (if known) 4.2 \$240.00 Convergent Outsourcing, Inc. Last 4 digits of account number 7103 Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? **Opened 05/15** Po Box 9004 Renton, WA 98057 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Georgia Natural Gas ☐ Yes 4.3 **First Premier Bank** Last 4 digits of account number 7607 \$1,000.00 Nonpriority Creditor's Name Attn: Bankruptcv Opened 04/17 Last Active Po Box 5524 When was the debt incurred? 12/09/17 Sioux Falls, SD 57117 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.4 Merrick Bank/CardWorks \$975.00 Last 4 digits of account number 7641 Nonpriority Creditor's Name Attn: Bankruptcy Opened 7/06/17 Last Active Po Box 9201 When was the debt incurred? 12/10/17 Old Bethpage, NY 11804 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Page 28 of 59 Case number (if known) Document

Debtor 1 Howard Rivera

| US Deptartment of Education/Great Lakes | Last 4 digits of account number | 0581 | \$52,802.00 |
|---|--|--|-------------|
| Nonpriority Creditor's Name Attn: Bankruptcy Po Box 7860 | When was the debt incurred? | Opened 03/13 Last Active 6/24/16 | |
| Madison, WI 53707 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | Other. Specify | | |
| | Educationa | l | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Т | otal Claim |
|--------------|-----|---|-----|----|------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 489.88 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 489.88 |
| | | | | | otal Claim |
| | 6f. | Student loans | 6f. | \$ | 52,802.00 |
| Total claims | | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 2,765.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 55,567.00 |

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

| Fill in this infor | mation to identify your | case: | | |
|---|-------------------------|-------------------|------------|--------------------------------------|
| Debtor 1 | Howard Rivera | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF GEORGIA | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | n whom you have the or, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|--|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | = |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| | • | | | | |

| | | Docume | ent Pade 30 d |)T 59 | |
|---|--|---|--|---|--|
| Fill in this inf | formation to identify your | | | | |
| Debtor 1 | Howard Rivera | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| - | Bankruptcy Court for the: | NORTHERN DISTRICT | OF GEORGIA | | |
| | | | | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| | Form 106H le H: Your Cod | ebtors | | | 12/15 |
| people are fili fill it out, and your name an | ing together, both are equ | ally responsible for supp boxes on the left. Attach . Answer every question | olying correct informat n the Additional Page t | ion. If more space is ne o this page. On the top | te as possible. If two married seded, copy the Additional Page, of any Additional Pages, write |
| 1. DO you | a nave any codebiors? (II) | you are ming a joint case, | do not list either spouse | as a codebior. | |
| ■ No □ Yes | | | | | |
| Arizona, G | California, Idaho, Louisiana, | Nevada, New Mexico, Pu | erto Rico, Texas, Washi | | states and territories include |
| 3. In Colum | in 1, list all of your codebt again as a codebtor only i 6D), Schedule E/F (Official | ors. Do not include your f that person is a guaran | spouse as a codebtor tor or cosigner. Make | sure you have listed the | with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| | lumn 1: Your codebtor ne, Number, Street, City, State and Zl | P Code | | Column 2: The cree Check all schedules | ditor to whom you owe the debt s that apply: |
| Nan | nber Street | State | ZIP Code | ☐ Schedule D, line☐ Schedule E/F, line☐ Schedule G, line☐ | ne |
| City | | State | ZIP Code | | |
| 3.2 Nan | ne | | | ☐ Schedule D, line ☐ Schedule E/F, lin ☐ Schedule G, line | ne |
| Nun City | | State | ZIP Code | _ | |

Case 19-52729-jwc Doc 1

| | , , | | | | | |
|--|--|--|---|------|--|-------|
| Debtor 1 | Howard Rive | era | | | | |
| Debtor 2 (Spouse, if filing) | | | | | | |
| United States Bankru | ptcy Court for the | : NORTHERN DISTRIC | CT OF GEORGIA | | | |
| Case number (If known) | | | - | | eck if this is: An amended filing A supplement showing postpetition chap 13 income as of the following date: | ter |
| Official Form | n 106l | | | | MM / DD/ YYYY | |
| Schedule I: | Your Inc | ome | | | | 12/15 |
| | | | | | ` , | stion |
| Part 1: Descrii | be Employment | | | | . , , , , , , , , , , , , , , , , , , , | stion |
| Fill in your empinformation. | oloyment | | Debtor 1 | | Debtor 2 or non-filing spouse | stion |
| Fill in your empinformation. If you have more attach a separat | ployment e than one job, te page with | Employment status | Debtor 1 ■ Employed □ Not employed | | ■ Employed | stion |
| Fill in your empinformation. If you have more | ployment e than one job, te page with | Employment status Occupation | ■ Employed | | _ | stion |
| Fill in your empinformation. If you have more attach a separatinformation about | e than one job, te page with ut additional e, seasonal, or | | ■ Employed □ Not employed | Inc. | ■ Employed □ Not employed | stion |
| Fill in your empinformation. If you have more attach a separat information about employers. Include part-time self-employed was a self-employed was a self-employed. | e than one job, te page with ut additional e, seasonal, or vork. | Occupation | ■ Employed □ Not employed Cordinator | | ■ Employed □ Not employed Teacher | |
| Fill in your empinformation. If you have more attach a separat information about employers. Include part-time self-employed with the company of the c | e than one job, te page with ut additional e, seasonal, or vork. | Occupation Employer's name | ■ Employed □ Not employed Cordinator Home Depot U.S.A. 2455 Paces Ferry Ro Atlanta, GA 30339 | | ■ Employed □ Not employed Teacher Mt. Zion Primary School 2920 Mount Zion Road | |
| 1. Fill in your empinformation. If you have more attach a separat information about employers. Include part-time self-employed work or homemaker, in the company of the | e than one job, te page with ut additional e, seasonal, or vork. | Occupation Employer's name Employer's address How long employed t | ■ Employed □ Not employed Cordinator Home Depot U.S.A. 2455 Paces Ferry Ro Atlanta, GA 30339 | | ■ Employed □ Not employed Teacher Mt. Zion Primary School 2920 Mount Zion Road Jonesboro, GA 30236 | |
| 1. Fill in your empinformation. If you have more attach a separatinformation about employers. Include part-time self-employed w Occupation may or homemaker, i | e than one job, te page with ut additional e, seasonal, or york. y include student if it applies. etails About Mor | Occupation Employer's name Employer's address How long employed to | ■ Employed □ Not employed Cordinator Home Depot U.S.A. 2455 Paces Ferry Ro Atlanta, GA 30339 here? 5 years | oad | ■ Employed □ Not employed Teacher Mt. Zion Primary School 2920 Mount Zion Road Jonesboro, GA 30236 | |

List monthly gross wages, salary, and commissions (before all payroll 2. deductions). If not paid monthly, calculate what the monthly wage would be.

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

| | | | non- | filing spouse |
|----|------|----------|------|---------------|
| 2. | \$_ | 3,239.00 | \$ | 3,980.00 |
| 3. | +\$_ | 0.00 | +\$_ | 0.00 |
| 4. | \$ | 3 239 00 | \$ | 3 980 00 |

Official Form 106I Schedule I: Your Income page 1

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 32 of 59

| Deb | tor 1 | Howard Rivera | _ | Case | number (if known) | | | |
|-----|---------------|---|------------|-------------|-------------------|--------------------------|-------------------------|--------------|
| | | | | | | | | |
| | | | | Foi | r Debtor 1 | | btor 2 or ing spouse | |
| | Сор | y line 4 here | 4. | \$ | 3,239.00 | \$ | 3,980.00 | |
| E | l ist | | | | <u> </u> | | | |
| 5. | | all payroll deductions: | 5a. | \$ | 202.00 | ¢ | 400.00 | |
| | 5a. 5b. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans | 5a. 5b. | \$ _ | 263.00 0.00 | \$ | 180.00 0.00 | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$_ | 0.00 | \$ | 0.00 | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | 0.00 | |
| | 5e. | Insurance | 5e. | \$ | 242.00 | \$ | 0.00 | |
| | 5f. | Domestic support obligations | 5f. | \$_ | 0.00 | \$ | 0.00 | |
| | 5g. | Union dues | 5g. | \$_ | 0.00 | \$ | 0.00 | |
| | 5h. | Other deductions. Specify: Homer Fund | 5h.+ | \$_ | | + \$ | 0.00 | |
| | | Purchpower | _ | \$_ | 156.00 | \$ | 0.00 | |
| | | STD LTD | _ | \$_ \$ | 28.00 14.00 | \$ | 0.00 | |
| _ | | | | - | | · · · · · · · | - | |
| 6. | | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$_ | 705.00 | \$ | 180.00 | |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$_ | 2,534.00 | \$ | 3,800.00 | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | 0.00 | |
| | 8b. | Interest and dividends | 8b. | \$ - | 0.00 | \$ | 0.00 | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | \$_ \$ | 0.00 | \$ \$ | 0.00 | |
| | 8d. | Unemployment compensation | 8d. | \$ - | 0.00 | \$ | 0.00 | |
| | 8e. | Social Security | 8e. | \$- | 0.00 | \$ | 0.00 | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | e 8f. | \$ | 0.00 | \$ | 0.00 | |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | 0.00 | |
| | 8h. | Other monthly income. Specify: Part Time Job Medline | 8h.+ | \$ | 1,020.00 | + \$ | 0.00 | |
| 9. | Add | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 1,020.00 | \$ | 0.00 | |
| 10. | | culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. \$_ | | 3,554.00 + \$_ | 3,800 | = \$ | 7,354.00 |
| 11. | Inclu othe | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your prince friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | depend | | | • | edule J. 11. +\$ | 0.00 |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies | | | | | · | 7,354.00 |
| | | | | | | | Combin monthly | ea income |
| 13. | Do y ■ | you expect an increase or decrease within the year after you file this form No. Yes. Explain: | ? | | | | | |

| E-11 | in this in farm | tion to identify | | | | | | |
|--|------------------------------|---|--------------|--|---|-----------------|--------------------|---|
| FIII | in this informat | tion to identify yo | ur case: | | | | | |
| Deb | tor 1 | Howard Rivera | | | Check if this is: | | | |
| Deh | tor 2 | | | | | _ | An amended filing | ving postpotition chapter |
| 1 | Debtor 2 (Spouse, if filing) | | | | | | 3 expenses as of | ving postpetition chapter the following date: |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEO | | | DO14 | _ | | | | |
| Unit | ed States Bankr | uptcy Court for the: | NORTH | HERN DISTRICT OF GEO | RGIA | Ŋ | MM / DD / YYYY | |
| 1 | e number | | | | | | | |
| (If k | nown) | | | | | | | |
| | | | | | | | | |
| O | fficial Fo | rm 106J | | | | | | |
| S | chedule | J: Your E | Exper | nses | | | | 12/15 |
| Ве | as complete a | and accurate as | possible | . If two married people ar | | | | |
| | | ore space is nee n). Answer ever | | ch another sheet to this | form. On the top of | any addition | nal pages, write y | our name and case |
| nui | ilbei (il kilowi | ii). Aliswei ever | y questio | · · · · · · · · · · · · · · · · · · · | | | | |
| Par | | ibe Your House | hold | | | | | |
| 1. | Is this a join | | | | | | | |
| | ■ No. Go to | | | ata hawaahald0 | | | | |
| | | | n a separ | ate household? | | | | |
| | | - | t filo Offic | ial Form 106J-2, <i>Expenses</i> | for Congrate House | hold of Dobte | or 2 | |
| | <u></u> п | es. Debiol 2 mas | or the Offic | iai Foiiii 1005-2, <i>Experise</i> s | s for Separate Flouse | noid of Debit | JI 2. | |
| 2. | Do you have | e dependents? | ☐ No | | | | | |
| | Do not list De Debtor 2. | ebtor 1 and | ■ Yes. | Fill out this information for each dependent | Dependent's relation Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents i | | | | Daughter | | 18 | ■ Yes |
| | | | | | | | | □ No |
| | | | | | Daughter | | 20 | Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| 3. | Do vour exp | enses include | _ | Lau- | | | | ☐ Yes |
| 0. | expenses of | f people other th | nan _ | l No l Yes | | | | |
| | yourself and | d your depender | nts? └ | 1 165 | | | | |
| | | ate Your Ongoir | | | | | | |
| | | | | uptcy filing date unless y y is filed. If this is a supp | | | | |
| | olicable date. | i date after the b | Jankrupic | y is illeu. Il tills is a supp | nemental Schedule | J, Check the | box at the top of | i the form and thi in the |
| | | | | | £ l | | | |
| | | | | government assistance i cluded it on <i>Schedule I:</i> \ | | | | |
| (Of | ficial Form 10 | 6I.) | | | | | Your expe | enses |
| | | | | | | | | |
| 4. | | or home owners! and any rent for the | | ises for your residence. I or lot. | nclude first mortgage | 4. \$ | | 850.00 |
| | If not includ | ed in line 4: | | | | | | • |
| | 4a. Real e | state taxes | | | | 4a. \$ | | 0.00 |
| | | rty, homeowner's | s, or renter | 's insurance | | 4b. \$ | - | 0.00 |
| | | | | upkeep expenses | | 4c. \$ | | 50.00 |
| E | | owner's associati | | | and a manufacture of | 4d. \$ 5. \$ | | 0.00 |
| 5. | Additional n | nortaade bavme | ents for v | our residence, such as ho | me equity loans | 5. 3 | | 0.00 |

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 34 of 59

| ties: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services | 6a. 6b. | · - | 300.00 |
|--|--|---|---|
| Electricity, heat, natural gas Water, sewer, garbage collection | | | |
| | 6b. | \$ | 400.00 |
| Telephone, cell phone, Internet, satellite, and cable services | | Ψ | 120.00 |
| . s.spono, con priorio, interriot, automito, and audio del video | 6c. | \$ | 0.00 |
| Other. Specify: Cable | 6d. | \$ | 90.00 |
| Cell Phone | | \$ | 260.00 |
| Internet | _ | \$ | 90.00 |
| Garbage | | \$ | 15.00 |
| Pest Control | | \$ | 25.00 |
| d and housekeeping supplies | | \$ | 1,155.00 |
| . • | 8. | \$ | 0.00 |
| thing, laundry, and dry cleaning | | \$ | 256.00 |
| | 10. | \$ | 392.00 |
| · | | \$ | 208.00 |
| • | | · | 200.00 |
| | 12. | \$ | 452.00 |
| | 13. | \$ | 0.00 |
| | 14. | \$ | 300.00 |
| rance. | | | |
| | | | |
| | 15a. | \$ | 0.00 |
| . Health insurance | 15b. | \$ | 0.00 |
| | 15c. | \$ | 940.00 |
| Other insurance. Specify: | 15d. | \$ | 0.00 |
| | 16. | \$ | 0.00 |
| | | _ | |
| | | · | 0.00 |
| • • | 17b. | \$ | 0.00 |
| | | · | 186.00 |
| Other. Specify: wife's vaccum payments | 17d. | \$ | 50.00 |
| wife's credit card payments | | \$ | 45.00 |
| | | Φ. | 0.00 |
| | 18. | · | |
| | | \$ | 0.00 |
| • | | ! | |
| | | | 0.00 |
| | | | 0.00 |
| | | · · · · · · · · · · · · · · · · · · · | 0.00 |
| | | · | 0.00 |
| | | * | 0.00 |
| | | | 0.00 |
| er: Specity: | 21. | +\$ | 0.00 |
| culate your monthly expenses | | | |
| | | \$ | 5,784.00 |
| · · · · · · · · · · · · · · · · · · · | | \$ | -, |
| | | · | 5,784.00 |
| | | | 3,704.00 |
| | | | |
| | | · | 7,354.00 |
| Copy your monthly expenses from line 22c above. | 23b. | -\$ | 5,784.00 |
| Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c. | \$ | 1,570.00 |
| il des currica una occidenta occiden | Pest Control od and housekeeping supplies ilidicare and children's education costs ithing, laundry, and dry cleaning isonal care products and services dical and dental expenses insportation. Include gas, maintenance, bus or train fare. not include car payments. itertainment, clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations urance. not include insurance deducted from your pay or included in lines 4 or 20. i. Life insurance b. Health insurance c. Vehicle insurance. b. Health insurance. c. Vehicle insurance. d. Other insurance. Specify: tess. Do not include taxes deducted from your pay or included in lines 4 or 20. serfy: tallment or lease payments: a. Car payments for Vehicle 1 b. Car payments for Vehicle 1 b. Car payments for Vehicle 1 c. Car payments for Vehicle 1 d. Other. Specify: wife's vaccum payments wife's credit card payments ur payments of alimony, maintenance, and support that you did not report as fucted from your pay on line 5, Schedule I, Your Income (Official Form 106I). ter payments you make to support others who do not live with you. serfy: ter real property expenses not included in lines 4 or 5 of this form or on Sched a. Mortgages on other property b. Real estate taxes b. Property, homeowner's, or renter's insurance d. Maintenance, repair, and upkeep expenses d. Homeowner's association or condominium dues ter: Specify: culate your monthly expenses for Debtor 2), if any, from Official Form 106J-2 d. Add lines 4 through 21. d. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 d. Add lines 22a and 22b. The result is your monthly expenses. culate your monthly net income. d. Copy line 12 (your combined monthly income) from Schedule I. d. Copy line 12 (your schedule monthly income) from Schedule I. d. Copy line 12 (your schedule monthly income) from Schedule I. d. Copy line 12 (your schedule monthly income) from Schedule I. d. Copy line 12 (your schedule monthly income) from Schedule I. d. Copy line 12 (your schedule mon | Pest Control and and housekeeping supplies idicare and children's education costs thing, laundry, and dry cleaning sonal care products and services dical and dental expenses not include gas, maintenance, bus or train fare. not include car payments. tertainment, clubs, recreation, newspapers, magazines, and books raitable contributions and religious donations urance. not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. 16c. 17c. 17c. 18c. 18c. 18c. 18c. 18c. 18c. 18c. 18 | Pest Control ad and housekeeping supplies Idcare and children's education costs thing, laundry, and dry cleaning sonal care products and services dical and dental expenses insportation. Include gas, maintenance, bus or train fare. not include car payments. training trush clubs, recreation, newspapers, magazines, and books aritable contributions and religious donations urance. not include insurance deducted from your pay or included in lines 4 or 20. 15a. \$ 15a. \$ 15b. \$ 15b. \$ 15c. |

| Fill in this infor | rmation to identify your | case: | | |
|---------------------|--------------------------|-------------------|------------|--|
| Debtor 1 | Howard Rivera | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF GEORGIA | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | | assets of what you own |
|-----|--|---------------------------------|---------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 54,855.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 54,855.00 |
| Pai | t 2: Summarize Your Liabilities | | |
| | | Your liabilities Amount you owe | |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 68,897.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 489.88 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 55,567.00 |
| | Your total liabilities | \$ | 124,953.88 |
| Pai | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 7,354.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 5,784.00 |
| Pai | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other so | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

the court with your other schedules.

Entered 02/19/19 14:35:14 Desc Main Case 19-52729-jwc Doc 1 Filed 02/19/19 Page 36 of 59 Case number (if known) Document

Debtor 1 Howard Rivera

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 6,968.00 \$ 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total | claim |
|--|-------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 489.88 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 52,802.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 53,291.88 |

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 37 of 59

| | rmation to identify your | case: | | | | | |
|---------------------|--|--------------------------|--------------|------------------------|---------------|---|-------|
| Debtor 1 | Howard Rivera First Name | Middle Name | Lac | st Name | | | |
| Debtor 2 | First Name | Middle Name | La | st riame | | | |
| (Spouse if, filing) | First Name | Middle Name | Las | st Name | | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF GEOR | GIA | | | |
| Case number | | | | | | | |
| (if known) | | | | | | ☐ Check if this is an amended filing | |
| Official For | - | | | | _ | | |
| Declarat | tion About a | ın Individual | Debt | or's Schedı | ules | | 12/15 |
| Sig | ın Below | | | | | | |
| Did you pa | ay or agree to pay some | one who is NOT an attor | rney to help | you fill out bankrupto | cy forms? | | |
| ■ No | | | | | | | |
| ☐ Yes. | Name of person | | | | | ruptcy Petition Preparer's No and Signature (Official Form | |
| | alty of perjury, I declare re true and correct. | that I have read the sum | nmary and s | chedules filed with th | is declaratio | n and | |
| X /s/ Ho | ward Rivera | | х | | | | |
| Howa | rd Rivera ure of Debtor 1 | | | Signature of Debtor 2 | | | |
| Date | February 19, 2019 | | | Date | | | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF GEORGIA

RIGHTS AND RESPONSIBILITIES STATEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

Chapter 13 of the Bankruptcy Code gives each debtor ("Debtor") important rights, such as the right to keep property that could otherwise be lost through repossession, foreclosure or liquidation by a Chapter 7 Trustee. Chapter 13 also places burdens on Debtors, however, such as the burden of making complete and truthful disclosures of their financial situation and prompt payments as required by the Plan. It is important for Debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities to the court, the Chapter 13 Trustee and to creditors. Debtors are entitled to expect certain services to be performed by their attorneys, but Debtors also have responsibilities to their attorneys. To assure that Debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Georgia have approved this statement of rights and responsibilities of Debtors and their attorneys in Chapter 13 cases that include, but are not limited to the following, as each case's facts may require more of both Debtor and Debtor's attorney.

BEFORE THE CASE IS FILED

EACH DEBTOR SHALL:

- 1. Discuss with the attorney the Debtor's objectives in filing the case.
- 2. Timely provide the attorney with full and accurate financial and other information, including, but not limited to:
 - (a) Copies of pay stubs or other evidence of payment received before the date of filing of the petition, as requested by the attorney;
 - (b) Copies of all Federal income tax returns (or transcript of the returns) as requested by the attorney.
- 3. Inform the attorney of any and all prior bankruptcy cases Debtor has filed.
- 4. Provide copies of all bills, notices, statements or communications from creditors, as requested by attorney.

THE ATTORNEY SHALL:

- 1. Personally counsel Debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss with Debtor the procedures in both Chapters, as well as non-bankruptcy options, and answer the Debtor's questions.
- 2. Personally explain to the Debtor the requirement of obtaining a certificate from an approved nonprofit budget and credit counseling agency.
- 3. Personally explain to Debtor that the attorney is being engaged to represent Debtor on all matters arising in the case, and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 4. Personally review with Debtor and obtain Debtor's signature on the completed petition, plan, as well as the Statement of Financial Affairs, Income and Expenses, and other statements as well as the various schedules (the "Schedules"), and all amendments thereto, whether filed with the petition or later. The Schedules may be prepared initially with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing by Debtor.
- 5. Timely prepare and file Debtor's petition, plan, Schedules, statement of monthly net income, and any other required pleading.
- 6. Explain to Debtor how, when and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 Trustee, with particular attention to

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 39 of 59

housing, vehicle, and domestic support obligation payments.

- 7. Advise Debtor of the need to maintain appropriate insurance especially for house and vehicle.
- 8. Inform Debtor of the need to potentially provide attorney with copies of each Federal income tax return (or transcript of the return) for each tax year ending while the Debtor is in the case.

AFTER THE CASE IS FILED

EACH DEBTOR SHALL:

- 1. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income, a photo identification card, and proof of Social Security number. Acceptable forms of proof of identification are: driver's license; government ID; state picture ID; student ID; U.S. passport; military ID; resident alien card. Acceptable forms of proof of Social Security number are: Social Security Card; medical insurance card; pay stub; W-2 form; IRS form 1099; Social Security Administration Report. Debtor must be present both in time for check-in and when the case is called for the actual examination.
- 2. Make the required payments to Trustee and to such creditors as are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 3. Promptly provide attorney, upon their request, evidence of all payments made directly to creditors and Trustee, including amount and date of payment.
- 4. Notify the attorney immediately of any change in Debtor's address or telephone number.
- 5. Inform the attorney of any wage garnishments, liens or levies on assets that occur or continue after the filing of the case.
- 6. Contact the attorney immediately if Debtor loses employment, is "laid off" or furloughed from work or has any significant change in income; experiences any other significant change in financial situation, including serious illness, personal injury, lottery winnings, or an inheritance.
- 7. Notify the attorney immediately if Debtor is sued or wishes to file a lawsuit, including divorce, matters regarding personal or property injury (including any worker's compensation matters), and any other matter in which Debtor is involved in a lawsuit or legal action outside this court.
- 8. Inform the attorney immediately if any tax refunds to which Debtor is entitled are seized or not received when due from the IRS or Georgia Department of Revenue.
- 9. Contact the attorney before buying, refinancing, or contracting to sell real property, and before entering into any loan agreement.
- 10. Complete an instructional course concerning personal financial management prior to receiving a discharge.

THE ATTORNEY SHALL:

- 1. Advise Debtor of the requirement to attend the meeting of creditors, and notify or remind Debtor of the date, time, and place of the meeting, in such detail as is helpful or necessary to Debtor's appearance.
- 2. Inform Debtor that Debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide competent legal representation for Debtor at the meeting of creditors, appear in time for check-in and the actual examination and, unless excused by Trustee, for the confirmation hearing.
- 4. If an attorney not employed by Debtor's attorney's law firm (a "contract" attorney) will be attending Debtor's 341 meeting or any court hearing, personally explain to Debtor in advance the role and identity of the contract

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 40 of 59

attorney, obtain Debtor's written permission for the contract attorney to represent Debtor and provide the contract attorney with the file in sufficient time to review and discuss it with Debtor prior to such representation.

- 5. Make all reasonable efforts for the individual attorney who met with Debtor to attend the § 341 meeting or any other court hearing. However, if that attorney is unavailable then an attorney will be present on behalf of the Debtor with knowledge of the Debtor's case and authority to make any modifications to Debtor's plan deemed necessary.
- 6. Timely submit to Trustee properly documented proof of income for each Debtor, including business reports for self-employed debtors, and all required pay advises and tax returns or transcripts.
- 7. Timely respond to objections to plan confirmation, and where necessary, prepare, file and serve amended Schedules or an amended plan.
- 8. Timely prepare, file, and serve any necessary annual financial statements, amended statements and Schedules, and any change of address, in accordance with information provided by each Debtor.
- 9. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact promptly Trustee or Debtor regarding any discrepancies.
- 10. Promptly respond to Debtor's questions through the term of the plan.
- 11. Timely prepare, file and serve necessary modifications to the plan after confirmation, including modifications to suspend, lower, or increase plan payments.
- 12. Prepare, file and serve necessary motions to buy or sell property and to incur debt.
- 13. On or before 60 days after the general bar date, certify the attorney has reviewed claims with Debtor, prepared, filed and served objections to improper or invalid claims and filed claims within 30 days after the bar date for creditors who fail to file claims when such failure will adversely affect Debtor's case or its successful completion and discharge or such failure will adversely affect Debtor after case completion and discharge.
- 14. Timely confer with Debtor and respond to any motion to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase percentage payment to unsecured creditors.
- 15. Timely confer with Debtor and respond to motions for relief from stay.
- 16. Timely prepare, file, and serve appropriate motions to avoid liens.
- 17. Provide any other legal services necessary for the administration of the case.

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 41 of 59

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Georgia

| In r | re Howard Rivera | | Case No. | |
|------|--|--|-----------------|-------------------------------------|
| | D | ebtor(s) | Chapter | 13 |
| | DISCLOSURE OF COMPENSATION | N OF ATTORNEY | FOR DI | EBTOR(S) |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify t compensation paid to me within one year before the filing of the petit be rendered on behalf of the debtor(s) in contemplation of or in conne | ion in bankruptcy, or agree | d to be paid | to me, for services rendered or to |
| | For legal services, I have agreed to accept | \$ | | 4,000.00 |
| | Prior to the filing of this statement I have received | | | 0.00 |
| | Balance Due | | | 4,000.00 |
| 2. | \$310.00_ of the filing fee has been paid. | | | |
| 3. | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. | The source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 5. | ■ I have not agreed to share the above-disclosed compensation with | any other person unless th | ey are mem | bers and associates of my law firm. |
| | ☐ I have agreed to share the above-disclosed compensation with a p copy of the agreement, together with a list of the names of the peo | | | |
| 6. | In return for the above-disclosed fee, I have agreed to render legal ser | rvice for all aspects of the | oankruptcy o | ease, including: |
| | a. Analysis of the debtor's financial situation, and rendering advice to b. Representation of the debtor at the meeting of creditors and confir c. [Other provisions as needed] Stop Creditor Action Motion to Extend or Impose Stay Hearing Pre-Confirmation Motion for Relief from Stay Employer Deduction Order Lien Avoidances Necessary to Confirm Plan Modifications Necessary to Confirm Plan Objections to Claim Necessary to Confirm Plan Bar Date Review and Filing of Certification Filing of Pre-Discharge Financial Counseling Certif | mation hearing, and any ac | | |
| 7. | Motion to Strip Lien \$50 Post-confirmation add creditors \$ | \$600.00 00.00 0.00 3300.00 \$400.00 \$450.00 \$500. \$500. \$500. | 00 00 .00 | |

Motion to Reimpose Stay

Motion to Voluntary Dismiss Case

Motion to Dismiss for Failure to Submit Tax Return

Motion to Reopen, Reconsider or Vacate Dismissal

Motion to Sever/Dismiss as to one joint debtor

Motion to Incurr Debt/Loan Modification

\$250.00

\$500.00

\$450.00

\$200.00

\$350.00 \$500.00 Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 42 of 59

| In re | Howard Rivera | Case No | |
|-------|---------------|---------|--|
| | | | |

Debtor(s)

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

Motion to Dismiss \$450 Adversary and Appellate Proceedings

(\$300 hourly)

Conversion of case before confirmation: Trustee shall pay fees to Debtor's attorney from the funds available up to \$2500.00.

Dismissal of case prior to confirmation of the plan: Trustee shall pay fees for Debtor's attorney of up to \$2500.00.

Case is converted after confirmation of the plan: Trustee shall pay to Debtor's attorney from the funds available, any allowed fees which are unpaid.

Case is dismissed after confirmation of the plan: Trustee shall pay to Debtor's attorney from the funds available, any allowed fees which are unpaid.

Debtor's attorney may file a fee application for attorney fees sought over \$2,500.00 within 10 days of the Order of Dismissal.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. Pursuant to General Order No. 9, I certify that I provided to the debtor(s) a copy of the "Rights and Responsibilities Statement Between Chapter 13 Debtors and Their Attorneys."

February 19, 2019

Date

Is/ Lorena L. Saedi
Lorena L. Saedi 622072
Signature of Attorney
Saedi Law Group, LLC

3006 Clairmont Road, Ste. 103 Atlanta, GA 30329 404-889-8663 Fax: 888-850-1774 Isaedi@saedilawgroup.com

Name of law firm

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 43 of 59

United States Bankruptcy Court Northern District of Georgia

| | | Northern District of Georgia | | |
|------|----------------------------------|---|--------------------|-----------------------|
| re | Howard Rivera | | Case No. | |
| | | Debtor(s) | Chapter | 13 |
| | VER | IFICATION OF CREDITOR | MATRIX | |
| | | | | |
| ab | ove-named Debtor hereby verifies | that the attached list of creditors is true and c | orrect to the best | of his/her knowledge. |
| ite: | February 19, 2019 | /s/ Howard Rivera | | |
| | - | Howard Rivera | | |

Signature of Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|---------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| <u>+</u> \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

| Fill in this inforr | Fill in this information to identify your case: | | | | | |
|---------------------------------|--|--|--|--|--|--|
| Debtor 1 | Howard Rivera | | | | | |
| Debtor 2 (Spouse, if filing) | | | | | | |
| United States E | Bankruptcy Court for the: Northern District of Georgia | | | | | |
| Case number (if known) | | | | | | |

| Check as directed in | Check as directed in lines 17 and 21: | | | | | |
|----------------------|---|--|--|--|--|--|
| According to the o | According to the calculations required by this Statement: | | | | | |
| | e income is not determined under § 1325(b)(3). | | | | | |
| | e income is determined under 11 (325(b)(3). | | | | | |
| 3. The comm | nitment period is 3 years. | | | | | |
| 4. The comm | nitment period is 5 years. | | | | | |

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Calculate Your Average Monthly Income Part 1: 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 4,259.00 2,990.00 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main

Document Page 49 of 59 **Howard Rivera** Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you 0.00 For your spouse 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10, Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 0.00 11. Calculate your total average monthly income. Add lines 2 through 10 for 4,259.00 2,990.00 7,249.00 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 7.249.00 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Wife's credit card 45.00 Wife's student loans 186.00 Wife's vaccum payment 50.00 281.00 281.00 Total Copy here=>

14. Your current monthly income. Subtract line 13 from line 12.

15. Calculate your current monthly income for the year. Follow these steps:

Multiply line 15a by 12 (the number of months in a year).

15b. The result is your current monthly income for the year for this part of the form.

6,968.00 **x** 12

6,968.00

83,616.00

15a. Copy line 14 here=>

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 50 of 59

| | | age or all or | | |
|----------|---------------|-------------------|-------------------|--|
| Debtor 1 | Howard Rivera | Case | number (if known) | |
| | | | | |

| 16. | Calculate | the median family income that applies to | ou. Follow these steps: | | | |
|------|-------------------------|---|---|------------------------------|-------------------------|-----------------|
| | 16a. Fill in | the state in which you live. | GA | | | |
| | 16b. Fill in | the number of people in your household. | 4 | | | |
| | 16c. Fill in | the median family income for your state and | size of household. | | _{\$} 80,510.00 | 0 |
| | | nd a list of applicable median income amounts | s, go online using the link specified in the | | * | _ |
| 17. | | uctions for this form. This list may also be avaine lines compare? | lable at the bankruptcy clerk's office. | | | |
| ••• | _ | Line 15b is less than or equal to line 16c. 0 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N | | | | ınder |
| | 17b. ■ | Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14 a | lation of Your Disposable Income (Off | | | - |
| Part | 3: Cal | Iculate Your Commitment Period Under 11 | U.S.C. § 1325(b)(4) | | | |
| 18. | Copy you | r total average monthly income from line 1 | 1 | \$ | 7,249 | .00 |
| 19. | contend the spouse's in | ne marital adjustment if it applies. If you are nat calculating the commitment period under 1 ncome, copy the amount from line 13. | married, your spouse is not filing with yo 1 U.S.C. § 1325(b)(4) allows you to dedu | u, and you | | |
| | 19a. If the | marital adjustment does not apply, fill in 0 on | line 19a. | - \$_ | 281 | .00 |
| | | | | | | |
| | 19b. Subt | ract line 19a from line 18. | | | \$ 6,968.00 | 0_ |
| | | | | L | | |
| 20. | | your current monthly income for the year. | | | ¢ 6,968.0 | 0 |
| | 20a. Copy | | | | Ψ | _ |
| | Multip | ply by 12 (the number of months in a year). | | | x 12 | \neg |
| | 20b. The r | result is your current monthly income for the y | ear for this part of the form | | \$83,616.00 | <u>0</u> |
| | 20c. Copy | the median family income for your state and | size of household from line 16c | | \$80,510.00 | 0 |
| | 21. How | do the lines compare? | | | | |
| | | Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4. | se ordered by the court, on the top of pag | ge 1 of this form, check bo | x 3, The commitm | ent |
| | | Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4. | lless otherwise ordered by the court, on the | he top of page 1 of this for | m, check box 4, 7 | ⁻ he |
| Part | 4: Sig | ın Below | | | | |
| | By signing | here, under penalty of perjury I declare that | he information on this statement and in a | ny attachments is true and | d correct. | |
| Х | /s/ How | ard Rivera | | | | |
| | Howard | l Rivera | | | | |
| | Ū | e of Debtor 1 pruary 19, 2019 | | | | |
| | | /DD /YYYY | | | | |
| | If you ched | cked 17a, do NOT fill out or file Form 122C-2. | | | | |
| | If you ched | cked 17b, fill out Form 122C-2 and file it with | his form. On line 39 of that form, copy yo | ur current monthly income | from line 14 abov | ve. |

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 51 of 59

| Fill in | this information | to identify your case: | |
|--------------------------|--|---|-----------------------------------|
| Debto | r 1 Howa | rd Rivera | |
| Dahta | | | |
| Debto | | | |
| (Spou | se, if filing) | | |
| United | d States Bankrupto | cy Court for the: Northern District of Georgia | |
| Case | number | | |
| (if kno | wn) | □ Check if | this is an amended filing |
| | | | |
| | I Form 122C-2 | | |
| Cha | ıpter 13 C | alculation of Your Disposable Income | 04/16 |
| Comm Be as s space | itment Period (O complete and ac is needed, attacl | u will need your completed copy of <i>Chapter 13 Statement of Your Current Monthly Ind</i> fficial Form 122C-1). curate as possible. If two married people are filing together, both are equally response a separate sheet to this form, include the line number to which additional information your name and case number (if known). | sible for being accurate. If more |
| Part 1 | : Calculate Y | our Deductions from Your Income | |
| the info | questions in line ormation may als | te Service (IRS) issues National and Local Standards for certain expense amounts. Uses 6-15. To find the IRS standards, go online using the link specified in the separate is to be available at the bankruptcy clerk's office. Amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you | nstructions for this form. This |
| | | nigher than the standards. Do not include any operating expenses that you subtracted from leduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C | |
| If yo | our expenses diffe | r from month to month, enter the average expense. | |
| Not | e: Line numbers 1 | -4 are not used in this form. These numbers apply to information required by a similar form | used in chapter 7 cases. |
| 5. | The number of | people used in determining your deductions from income | |
| | plus the number | er of people who could be claimed as exemptions on your federal income tax return, of any additional dependents whom you support. This number may be different from eople in your household. | 4 |
| Nat | ional Standards | You must use the IRS National Standards to answer the questions in lines 6-7. | |
| 6. | | and other items: Using the number of people you entered in line 5 and the IRS National the dollar amount for food, clothing, and other items. | \$1,694.00 |
| 7. | the dollar amour | nealth care allowance: Using the number of people you entered in line 5 and the IRS Nation to out-of-pocket health care. The number of people is split into two categoriespeople whose or olderbecause older people have a higher IRS allowance for health car costs. If your IRS amount, you may deduct the additional amount on line 22 | ho are under 65 and |

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 52 of 59

Debtor 1 Howard Rivera Case number (if known)

| | | vho are under 65 years of age | | | | | | | | | |
|-------------------------------|------------------------------------|--|--|---|---|----------------------------------|---------------|-------------|----------------------------------|------------------|--------|
| 7 | 7a. | Out-of-pocket health care allowance per person | \$ | 52 | - | | | | | | |
| 7 | 7b. | Number of people who are under 65 | Х | 4 | | | | | | | |
| 7 | 7c. | Subtotal. Multiply line 7a by line 7b. | \$ | 208.00 | - | Copy here=> | > \$ | 2 | 208.00 | | |
| еор | le w | vho are 65 years of age or older | | | | | | | | | |
| 7 | 7d. | Out-of-pocket health care allowance per person | \$ | 114 | | | | | | | |
| 7 | 7е. | Number of people who are 65 or older | X | 0 | | | | | | | |
| 7 | 7f. | Subtotal. Multiply line 7d by line 7e. | \$ | 0.00 | - | Copy here=> | > \$ | | 0.00 | | |
| - | ₹g. | Total. Add line 7c and line 7f | | | \$ | 208.00 | | Copy tot | tal here=> | \$ | 208.00 |
| | | andards You must use the IRS Local Standards to | | • | | | d fa | h a a i m a | fau | | |
| | | n information from the IRS, the U.S. Trustee Pro tcy purposes into two parts: | yrain na: | s uivided t | I GAI SII | .ocai Stanuari | u 10f | nousing | y IUI | | |
| Н | usi | ing and utilities - Insurance and operating expen | nses | | | | | | | | |
| ш | ousi | ing and utilities - Mortgage or rent expenses | | | | | | | | | |
| o ar epai | swe | er the questions in lines 8-9, use the U.S. Truste instructions for this form. This chart may also b ising and utilities - Insurance and operating expe | be availa | ble at the l | bankrup | tcy clerk's off | ice. | • | | pecifie | |
| o ar epai . I | swe ate lou n the | | be availa enses: ∪ | ble at the l | bankrup Imber of | tcy clerk's off | ice. | • | | pecifie | |
| o ar epai I | rate Hou n the | instructions for this form. This chart may also be using and utilities - Insurance and operating experie dollar amount listed for your county for insurance | be availa enses: U and oper | ble at the I Ising the nu rating expe | oankrup Imber of nses. | tcy clerk's off | ice. | in line 5 | | pecifie | |
| o ar epai . I . I | rate Hou n the Hou Da. | instructions for this form. This chart may also be using and utilities - Insurance and operating experie dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, first the state of the | be availa enses: U and oper fill in the | ble at the I Using the nu rating expended | bankrup umber of nses. unt | tcy clerk's off people you en | ice. tered | in line 5 | 5, fill \$_ | pecifie | |
| o ar epai . I . I | rate Hou n the Hou Da. | instructions for this form. This chart may also be using and utilities - Insurance and operating experience dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, 1 listed for your county for mortgage or rent expenses | be availa enses: U and oper fill in the es. and other | ble at the I lsing the nu rating exper dollar amou | bankrup umber of nses. unt ured by y | tcy clerk's off people you en | ice. tered | in line 5 | 5, fill \$_ | pecifie | |
| o ar epai . I . I | rate Hou n the Hou Da. | instructions for this form. This chart may also be using and utilities - Insurance and operating experience dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, for listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at a contractually due to each secured creditor in the 60 contractually due to each secure | be availa enses: U and oper fill in the es. and other dd all am 0 months | ble at the I lsing the nu rating exper dollar amou | pankrup imber of inses. unt ured by y are ile | tcy clerk's off people you en | ice. tered | in line 5 | 5, fill \$_ | pecifie | |
| o ar epai . I . I | rate Hou n the Hou Da. | instructions for this form. This chart may also be using and utilities - Insurance and operating experie dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, to listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at a contractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60. | be availa enses: U and oper fill in the es. and other dd all am 0 months | ble at the Island the nurating expended and the nurating expenses and | pankrup imber of inses. unt ured by y are ile | tcy clerk's off people you en | ice. tered | in line 5 | 5, fill \$_ | pecifie | 749.0 |
| o ar epai . I . I | rate Hou n the Hou Da. | instructions for this form. This chart may also be using and utilities - Insurance and operating experie dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, the listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at a contractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60. Name of the creditor | be availatenses: Use and open fill in the ess. and other and other and all am 0 months | ble at the Island the nurating expended and the nurating expenses and | pankrup imber of nses. unt ured by y are ille | tcy clerk's off people you en | ice. tered | in line 5 | \$, fill \$_ 711.00 | Repea | 749.0 |
| o ar epai . I . I | rate Hou n the Hou Da. | instructions for this form. This chart may also be using and utilities - Insurance and operating experie dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, the listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at a contractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60. Name of the creditor | be availatenses: Use and open fill in the estand other add all am 0 months | ble at the Island the nurating expended and the nurating expenses and | pankrup imber of inses. unt ured by y are ile | tcy clerk's off people you en | ice. tered | in line 5 | \$, fill \$_ 711.00 | | 749.0 |
| o ar epar i i . I | eswerate Houn the Hou | instructions for this form. This chart may also be using and utilities - Insurance and operating experie dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, to listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at To calculate the total average monthly payment, accontractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60. Name of the creditor | be availatenses: Use and open fill in the estand other add all am 0 months | ble at the Island the nurating expended and the nurating expenses and | pankrup imber of nses. unt ured by y are ille | tcy clerk's off people you en | ice. tered | in line 5 | \$, fill \$_ 711.00 | Repea | 749.0 |
| o ar epar i i | eswerate Houn the Hou | instructions for this form. This chart may also be using and utilities - Insurance and operating experie dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, to listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages at a contractually due to each secured creditor in the 60 for bankruptcy. Next divide by 60. Name of the creditor 9b. Total average monthly payment. | be availatenses: Use and open fill in the est. and other and other and all am o months A pa \$ | ble at the Island the nurating expended of debts secure ounts that a safter you fiverage moayment | pankrup Imber of Inses. Int Int Int Int Int Int Int Int Int In | tcy clerk's off people you en | ice. tered | in line 5 | \$, fill \$_ 711.00 | Repea on line | 749.0 |

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document

Page 53 of 59 **Howard Rivera** Debtor 1 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 226.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 **Describe Vehicle 1:** 13a. Ownership or leasing costs using IRS Local Standard..... 0.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Average monthly Name of each creditor for Vehicle 1 payment -NONE-Repeat this Copy amount on **Total Average Monthly Payment** 0.00 0.00 here => Copy net 13c. Net Vehicle 1 ownership or lease expense Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. expense here 0.00 0.00 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment Сору Repeat this here amount on line Total average monthly payment 0.00 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. expense here 0.00 0.00

14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the

15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may

Public Transportation expense allowance regardless of whether you use public transportation.

not claim more than the IRS Local Standard for Public Transportation.

0.00

0.00

=>

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 54 of 59

Debtor 1 Howard Rivera Case number (if known)

| | | In addition to the expense de the following IRS categories | | s listed above | , you are allowed your monthly expenses | for | |
|------------|--|--|---|--|--|-------------------|----------|
| 16. | Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes. | | | | | \$ | 2,100.00 |
| 17. | Involuntary deductions: The contributions, union dues, are | , , , | uctions th | nat your job re | quires, such as retirement | | |
| | | | , such a | s voluntary 40 | 1(k) contributions or payroll savings. | \$ | 0.00 |
| 18. | Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. | | | | | | 0.00 |
| 19. | Court-ordered payments: administrative agency, such Do not include payments on | as spousal or child support | paymen | ts. | by the order of a court or You will list these obligations in line 35. | \$ | 0.00 |
| 20. | Education: The total month | ly amount that you pay for e | ducation | that is either | required: | | |
| | as a condition for your jol | o, or | | | | | |
| | for your physically or mer | ntally challenged dependent | child if r | no public educ | ation is available for similar services. | \$ | 0.00 |
| 21. | Childcare: The total monthly Do not include payments for | | | - | sitting, daycare, nursery, and preschool. | \$ | 0.00 |
| 22. | | and welfare of you or your | depende | ents and that is | amount that you pay for health care s not reimbursed by insurance or paid al entered in line 7. | | 0.00 |
| | Payments for health insuran | ce or health savings accoun | its should | d be listed only | y in line 25. | \$ | 0.00 |
| 23. | for you and your dependents phone service, to the extent income, if it is not reimburse Do not include payments for | s, such as pagers, call waitir necessary for your health a d by your employer. | ng, caller nd welfa | identification, re or that of yo | you pay for telecommunication services special long distance, or business cell our dependents or for the production of | | |
| | expenses, such as those rep | oorted on line 5 of Official Fo | | | ount you previously deducted. | +\$ | 0.00 |
| 24. | Add all of the expenses all Add lines 6 through 23. | | orm 1220 | C-1, or any am | | + \$ \$ | 6,688.00 |
| | Add all of the expenses all | owed under the IRS exper | orm 1220 nse allove eductions | C-1, or any am wances. s allowed by the | ount you previously deducted. | | |
| Add | Add all of the expenses all Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit | owed under the IRS expers These are additional de Note: Do not include are y insurance, and health sa | orm 1220 nse alloveductions ny expeni | c-1, or any am wances. s allowed by the use allowances ccount expen | ount you previously deducted. | \$ | |
| Add | Add all of the expenses all Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit insurance, disability insurance | owed under the IRS expers These are additional de Note: Do not include are y insurance, and health sa | orm 1220 nse alloveductions ny expeni | c-1, or any am wances. s allowed by the use allowances ccount expen | ne Means Test. s listed in lines 6-24. | \$ | |
| Add | Add all of the expenses all Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit insurance, disability insurance, your dependents. | owed under the IRS expers These are additional de Note: Do not include are y insurance, and health sa | orm 1220 nse allow eductions ny expen avings acunts that | vances. s allowed by the see allowances ccount expen are reasonab | ne Means Test. s listed in lines 6-24. | \$ | |
| Add | Add all of the expenses all Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit insurance, disabilit insurance, disability insurance your dependents. Health insurance | owed under the IRS expers These are additional de Note: Do not include are y insurance, and health sace, and health savings accord | nse alloweductions by expensions are that | vances. s allowed by the lise allowances ccount expender reasonab | ne Means Test. s listed in lines 6-24. | \$ | |
| Add | Add all of the expenses all Add lines 6 through 23. litional Expense Deductions Health insurance, disability insurance, disability insurance, our dependents. Health insurance Disability insurance | owed under the IRS expers These are additional de Note: Do not include are y insurance, and health sace, and health savings accord | orm 1220 nse allow eductions ny expen ivings a unts that | wances. s allowed by the see allowances ccount expentare reasonab 800.00 0.00 | ne Means Test. s listed in lines 6-24. | \$ | |
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Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 55 of 59

| 28 | | Case n | | | | | |
|----------------------|--|--|------------------|---|----------------|------------------|---------|
| | Additional home energy costs. Your hom line 8. | e energy costs are included in your insurance a | nd operating e | xpenses o | n | | |
| | If you believe that you have home energy c 8, then fill in the excess amount of home en | osts that are more than the home energy costs i ergy costs | included in exp | enses on | line | | |
| | You must give your case trustee documents amount claimed is reasonable and necessa | ation of your actual expenses, and you must shory. | ow that the add | ditional | | \$ | 0.0 |
| | | ren who are younger than 18. The monthly ex pendent children who are younger than 18 year | | | or | | |
| | You must give your case trustee documenta claimed is reasonable and necessary and n | ation of your actual expenses, and you must expot already accounted for in lines 6-23. | olain why the a | mount | | | |
| | * Subject to adjustment on 4/01/19, and eve | ery 3 years after that for cases begun on or after | the date of ac | ljustment. | | \$ | 0.0 |
| | | ne monthly amount by which your actual food ar allowances in the IRS National Standards. Tha s in the IRS National Standards. | | | | | |
| | | onal allowance, go online using the link specifie o be available at the bankruptcy clerk's office. | ed in the separ | ate | | | |
| | You must show that the additional amount of | claimed is reasonable and necessary. | | | | \$ | 0.0 |
| | Continuing charitable contributions. The instruments to a religious or charitable orga | amount that you will continue to contribute in th nization. 11 U.S.C. § 548(d)(3) and (4). | ne form of cash | or financi | al | | |
| | Do not include any amount more than 15% | of your gross monthly income. | | | _ | \$ | 0.0 |
| | Add all of the additional expense deduct Add lines 25 through 31. | ions. | | | ! | \$ | 800.00 |
| Dedu | ictions for Debt Payment | | | | | | |
| | | | | | | | |
| | or debts that are secured by an interest pans, and other secured debt, fill in lines | n property that you own, including home mo | ortgages, vehi | icle | | | |
| lo T | pans, and other secured debt, fill in lines | 33a through 33e. ent, add all amounts that are contractually due to | | | | | |
| lo T | pans, and other secured debt, fill in lines of calculate the total average monthly paym | 33a through 33e. ent, add all amounts that are contractually due to | | | | verage ayment | monthly |
| T c | oans, and other secured debt, fill in lines o calculate the total average monthly paym reditor in the 60 months after you file for bar Mortgages on your home | 33a through 33e. ent, add all amounts that are contractually due to | o each secure | | pa | | |
| T c | oans, and other secured debt, fill in lines o calculate the total average monthly paym reditor in the 60 months after you file for bar Mortgages on your home | 33a through 33e. ent, add all amounts that are contractually due thruptcy. Then divide by 60. | o each secure | d | pa | | |
| 10 C 33a. | cans, and other secured debt, fill in lines o calculate the total average monthly paym reditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles | 33a through 33e. ent, add all amounts that are contractually due to the structure. Then divide by 60. | o each secure | d => | \$ | | |
| 16 T c 33a. | cans, and other secured debt, fill in lines to calculate the total average monthly paym reditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here | 33a through 33e. ent, add all amounts that are contractually due to the structure of the st | o each secure | d => | \$ \$ | | 0.00 |
| lo T | cans, and other secured debt, fill in lines to calculate the total average monthly paym reditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here | 33a through 33e. ent, add all amounts that are contractually due to the structure. Then divide by 60. | o each secure | => => | \$ \$ | | 0.00 |
| 33a. 33b. 33c. | cans, and other secured debt, fill in lines o calculate the total average monthly paym reditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here | 33a through 33e. ent, add all amounts that are contractually due to the structure of the st | o each secure | => => | \$ \$ | | 0.00 |
| 33a. 33b. 33c. | cans, and other secured debt, fill in lines to calculate the total average monthly paym reditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: | 33a through 33e. ent, add all amounts that are contractually due to the structure of the st | Doe: | d => => s payment de taxes | \$ \$ | | 0.00 |
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| 33a. 33b. 33c. | cans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: | 33a through 33e. ent, add all amounts that are contractually due to the structure of the st | Does incluor in | d => s payment de taxes surance? No Yes | \$ \$ | | 0.00 |
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| 33a. 33b. 33c. | cans, and other secured debt, fill in lines to calculate the total average monthly paymeditor in the 60 months after you file for bar Mortgages on your home Copy line 9b here Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: | 33a through 33e. ent, add all amounts that are contractually due to the structure of the st | Does inclu or in | s payment de taxes surance? No Yes No Yes No Yes No Yes + | pa | | 0.00 |

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 56 of 59

Howard Rivera Debtor 1 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt **Total cure amount** Monthly cure amount $\div 60 = \$$ -NONE-Copy total 0.00 0.00 Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. ☐ No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 489.88 ÷60 \$ 8.16 36. Projected monthly Chapter 13 plan payment 1,575.00 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by 6.50 the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total 102.38 102.38 here=> \$ Average monthly administrative expense 110.54 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 6,688.00 expense allowances Copy line 32, All of the additional expense deductions 800.00 Copy line 37, All of the deductions for debt payment 110.54 7,598.54 7,598.54 Total deductions..... Copy total here=>

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 57 of 59

| ebtor 1 | Howard Ri | vera | | Case | e numl | oer (if known) | | |
|---|--|--|---|---|-----------------|---|--------------------|----------|
| art 2: | Determine | Your Disposable Income Un | der 11 U.S.C. § 132 | 5(b)(2) | | | | |
| | | current monthly income from | | | | | \$ | 6,968.00 |
| ch dis red | ildren. The mability payme ceived in acco | onably necessary income you onthly average of any child sup ints for a dependent child, repo rdance with applicable nonban expended for such child. | oport payments, fosterted in Part I of Form | er care payments, or 122C-1, that you | \$ | 0 | .00 | |
| em in | nployer withhe 11 U.S.C. § 54 | ed retirement deductions. The ld from wages as contributions \$1(b)(7) plus all required repay .S.C. § 362(b)(19). | for qualified retireme | ent plans, as specified | \$ | 0 | .00 | |
| 42. To | tal of all ded | uctions allowed under 11 U.S | .C. § 707(b)(2)(A). C | opy line 38 here=> | \$ | 7,598 | .54 | |
| ex the | penses and your perses. ' | pecial circumstances. If special circumstances. If special have no reasonable alternate You must give your case trusteend documentation for the expe | ive, describe the spe e a detailed explanat | cial circumstances and | d | | | |
| Descr | ibe the speci | al circumstances | | Amount of expe | nse | | | |
| | | | | _ \$ | | | | |
| | | | | _ \$ | | | | |
| | | | | _ \$ | | | | |
| | | | Total | \$ | Co _l | oy e=> \$ | 0.00 | |
| 44. To | tal adjustme | nts. Add lines 40 through 43 | | => [\$ | S | 7,598.54 | Copy here=> -\$ | 7,598.54 |
| 45. C a | • | monthly disposable income | under § 1325(b)(2). § | Subtract line 44 from li | ne 39 |). | \$ | -630.54 |
| 46. Ch ha tim | nange in inco ve changed o ne your case v u filed your pe | me or expenses. If the income r are virtually certain to change vill be open, fill in the informatic tition, check 122C-1 in the first d, fill in when the increase occu | after the date you file on below. For exampl column, enter line 2 | ed your bankruptcy pe e, if the wages reporte in the second column, | tition d inc | and during the reased after | | |
| Form | Line | Reason for change | | Date of change | | Increase or decrease? | Amount of o | hange |
| ☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122 | C-2 C-1 C-2 C-1 | | | | | ☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase | \$ | |
| ☐ 122 ☐ 122 ☐ 122 | C-1 | | | | _ | ☐ Decrease☐ Increase☐ Decrease☐ | \$ \$ | |

Case 19-52729-jwc Doc 1 Filed 02/19/19 Entered 02/19/19 14:35:14 Desc Main Document Page 58 of 59

| Debtor 1 | Howard Rivera | Case number (if known) | |
|----------|---|--|--|
| | | | |
| Part 4: | Sign Below | | |
| E | By signing here, under penalty of perjury you declare that the inform | mation on this statement and in any attachments is true and correct. | |
| - | /s/ Howard Rivera Howard Rivera Signature of Debtor 1 | | |
| Date | February 19, 2019 MM / DD / YYYY | | |

BridgecrestCase 19-52729-jwc Doc 1 Page 59 of 59 Document

Attn: Bankruptcy

7300 E Hampton Ave, Ste 100

Mesa, AZ 85209

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Auto Finance Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Convergent Outsourcing, Inc. Attn: Bankruptcy Po Box 9004 Renton, WA 98057

First Premier Bank Attn: Bankruptcy Po Box 5524 Sioux Falls, SD 57117

Georgia Department of Revenue ATTN: Bankruptcy Department 1800 Century Blvd., N.E. Atlanta, GA 30345

Internal Revenue Service ATTN: Bankruptcy Unit Stop 335-D, PO Box 995 Atlanta, GA 30370

Merrick Bank/CardWorks Attn: Bankruptcy Po Box 9201 Old Bethpage, NY 11804

US Deptartment of Education/Great Lakes Attn: Bankruptcy Po Box 7860 Madison, WI 53707

World Omni Financial Corp Attn: Bankruptcy Po Box 991817 Mobile, AL 36691